

State-Wide Publicly Funded Mental Health Performance Indicators

Fiscal Year 2002

Mental Health Division July 2003

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Department of Social and Health Services, Mental Health Division

Olympia, Washington

July, 2003

Cautions on Comparing Results

The Mental Health Division and the Performance Indicator Workgroup have made significant progress in developing and reporting performance measures. Data standards and definitions have improved, a training website has been developed, and internal and external review processes have been put in place. However issues remain about the comparability of these indicators across RSNs. Improvements in data reporting began during 2001 and 2002, so issues still remain in data reported in 1999 and 2000. Major policy and practice differences among RSNS, and contextual issues must be understood to properly compare performance measures. Therefore, cross RSN comparisons should be done with caution. The best use of this information is to look at trends over time for individual RSNs and compare with state-wide trends.

State of Washington Map DSHS/MHD RSN and County Boundaries



Acknowledgements

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The Mental Health Division would also like to thank the following individuals for their contributions to this report: Bruce Stegner and Katie Weaver Randall for all of the data reports that were generated and regenerated; Christina Carter for compilation and editing of this report; and Dennis McBride at The Washington Institute for Mental Illness Research and Training (WIMIRT) for conducting the MHSIP Youth/Family Surveys and the Adult Consumer Survey.

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System Level Performance Indicators: A Working Definition

Performance Indicators provide information on how well a system is doing. The federal *General Accounting Office* defines Performance Measurement as: "The ongoing monitoring and reporting of system-wide accomplishments, particularly progress toward pre-established goals...conducted by the program or agency management (GAO, 1988)." The Washington State Department of Social and Health Services utilizes the Mental Health Statistics Improvement Program (MHSIP) paradigm to understand the domains of mental health information:

- WHO receives services (gets)
- WHAT types of services are delivered (from)
- WHOM staffing patterns (at what)
- COST fiscal viability

<u>Outcome Measures</u> provide specific client-level information on the results of services:

 OUTCOMES: What happens to the individual as a RESULT of the mental health care they receive?

Performance Indicators

- Provide information on the number of clients accessing services; how services are delivered; which outcomes or goals are achieved; and how dollars are spent.
- Reflect agreed upon values and goals.
- Are clear, reliable (results the same each time) and valid (measure used is measuring what it says).
- Help system managers and system payers understand trends in service delivery systems and change across time.
- Provide feedback on system accountability and have the potential to improve quality and services.

People or Groups interested in Performance Indicators may include:

- Mental Health Division staff
- Consumers
- Family members
- Advocates
- Regional Support Networks (RSNs)
- Legislators
- Hospital and community providers
- Federal funding sources/oversight (HCFA, JCAHC)
- Other Federal programs (NASMHPD, MHSIP, CMHS)
- Other interested parties

Data Discussion

To define and develop System-wide Performance Indicators, three things must be considered:

- available or collectable information (what data do we have?)
- the process of describing and interpreting the information (what does the data mean?)
- and the application and use of the finished indicator (how will the information be used?)

Performance Indicators for the Washington State mental health system come from a combination of the following five data systems for mental health services and surveys:

- the Mental Health Division Consumer Information System (MHD-CIS)
- the State Psychiatric Hospital data base Health Integrated Information System (HIIS)
- the Medicaid Management Information System payment data base (MMIS)
- the Mental Health Statistics Improvement Project (MHSIP), Youth Services Survey (YSS), the Youth Services Survey for Families (YSS-F); and the Adult Consumer Survey (ACS).
- the Department of Social and Health Services (DSHS) Research and Data Analysis (RDA) Client Services Database (CSDB).

The data that describes the number and type of services received is collected in one or more of the major three databases. Service data provides a picture of each client's mental health service use within a Fiscal Year.

The survey data is based on statewide surveys conducted by the Washington Institute for Mental Illness Research and Training (WIMIRT) for the Mental Health Division. Copies of the following reports are available from: Judy Hall, Ph.D., Mental Health Division or on WIMIRT's Webpage http://depts.washington.edu/wimirt/Publications.htm.

- <u>Children with Special Needs Survey 2001</u> by Dennis McBride, Curt Malloy, Julie Jensen, Matthew Reid-Schwartz, and Genevieve Smith;
- <u>Toolkit for Children's Survey 2002</u> by Dennis McBride, Jonathan Lindsay, Genevieve Smith, and Curt Malloy; and
- <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> by Dennis McBride, Curt Malloy, Jonathan Lindsay, and Genevieve Smith

The indicators display the RSNs in the order of their population, from the smallest to the largest. The data notes section of the report describes:

- Special definition used in the indicators,
- Differences in RSN service delivery systems,
- Any other information that provides background for the data being reported.

Each chart lists a calculation date at the top. This is the date that the data was pulled from the database and the indicator was calculated. The data for this report were pulled between March and July of 2003.

In January 2002 the RSNs began reporting services data to the Mental Health Division using Current Procedural Terminology (CPT) codes and National Association of State Mental Health Program Directors (NASMHPD) temporary codes. To make the 2002 services data comparable to the services data received prior to 2002, some of the NASMHPD temporary codes have been excluded from the 2002 data when reporting on outpatient clients and services. The excluded NASMHPD temporary codes are crisis hotline calls (code 00012), 24-hour crisis services (code 00010, 00033), and residential services (codes 00025-00032, 00034, 00036). These codes are excluded because these services are inconsistently reported across the state and are believed not to have been reported prior to January 2002. Although these services were removed from this report, they are still included in the RSN Revenue and Expenditure reports that are used to create the Expenditure Indicators. We do this because we are unable to break out Outpatient Revenue and Expenditures by service type.

Throughout the report two terms are used to describe Medicaid recipients. <u>Medicaid Population</u> refers to all people who are currently enrolled in the Medicaid program whether or not they are currently receiving services from the Mental Health Division. <u>Medicaid Enrolled</u> refers to all people who are currently enrolled in the Medicaid program and who are currently enrolled in a RSN.



ACCESS I. Penetration Rates: General Population

A. Operational Definition: The proportion of people in the general population who received publicly funded outpatient mental health services in the Fiscal Year by RSN.

Rationale for Use: Penetration rates provide information on the number of people who received one or more mental health services relative to the general population. Penetration rates also provide information on whether the system is responsive to different client populations (i.e., different age groups) and allows comparisons to other State mental health data to help understand access across State mental health systems.

Operational Measures: This is calculated by dividing the number of people who received outpatient mental health services during the Fiscal Year by the number of people in the general population (census and estimated census).

Formula:

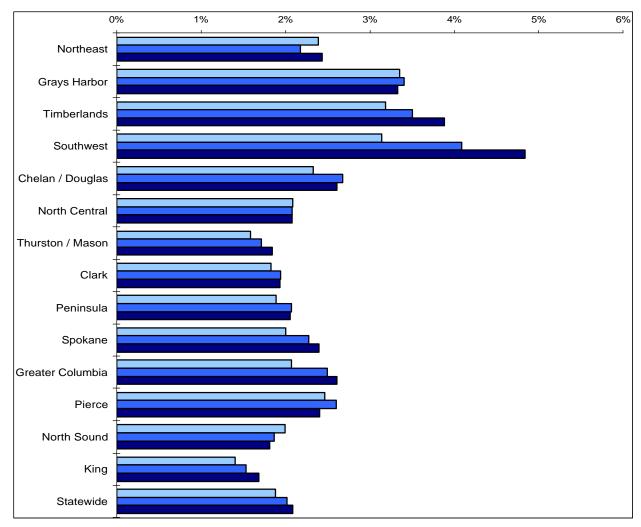
Number of people who received outpatient mental health services during the Fiscal Year

Number of people in the general population during the Fiscal Year

Discussion: The penetration rates by RSN and Statewide show the total population of each RSN and the State. Overall, the number of people served by the Mental Health system has increased.

- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- The statewide count shows the number of unduplicated clients within the state (i.e. a person is counted only once in the state even if they received services at multiple RSNs).
- The RSN count shows the number of unduplicated clients within each RSN (i.e., a person is counted once in <u>each</u> RSN where they receive services).
- Counts are of people, not admissions, episodes, or units of service.
- Data source is Service Utilization database (data set = su2003).
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.

Penetration Rate: General Population									
Access I. A.								Calc. 4/200	03 SAS
RSN		FY00		FY01			FY02		
Kok	Served	Population	Rate	Served	Population	Rate	Served	Population	Rate
Northeast	1,655	69,242	2.4%	1,514	69,600	2.2%	1,699	69,700	2.4%
Grays Harbor	2,254	67,194	3.4%	2,333	68,500	3.4%	2,277	68,400	3.3%
Timberlands	2,978	93,408	3.2%	3,301	94,300	3.5%	3,686	95,000	3.9%
Southwest	2,921	92,948	3.1%	3,840	93,900	4.1%	4,565	94,400	4.8%
Chelan / Douglas	2,312	99,219	2.3%	2,675	99,900	2.7%	2,629	100,700	2.6%
North Central	2,731	130,690	2.1%	2,745	132,200	2.1%	2,766	132,800	2.1%
Thurston / Mason	4,062	256,760	1.6%	4,459	259,800	1.7%	4,826	262,100	1.8%
Clark	6,320	345,238	1.8%	6,839	352,600	1.9%	7,017	363,400	1.9%
Peninsula	6,091	322,447	1.9%	6,715	324,300	2.1%	6,705	326,200	2.1%
Spokane	8,368	417,939	2.0%	9,600	422,400	2.3%	10,198	425,600	2.4%
Greater Columbia	12,444	599,730	2.1%	15,105	605,600	2.5%	15,954	611,100	2.6%
Pierce	17,290	700,820	2.5%	18,570	713,400	2.6%	17,437	725,000	2.4%
North Sound	19,188	961,452	2.0%	18,295	980,100	1.9%	17,995	993,000	1.8%
King	24,424	1,737,034	1.4%	27,003	1,758,300	1.5%	29,945	1,774,300	1.7%
Statewide	111,131	5,894,121	1.9%	120,717	5,974,900	2.0%	126,069	6,041,700	2.1%



ACCESS I. Penetration Rates: General Population by Age

B. Operational Definition: The proportion of people in the general population who received publicly funded outpatient mental health services by RSN by age group for a Fiscal Year.

Rationale for Use: Penetration rates by age group provide information on the number of children, adults, and elders who received mental health services relative to children, adults, and older adults in the general population, and allows comparison to other State mental health data to help understand access across the State mental health system.

Operational Measure: This is calculated by dividing the number of people in each age group who received outpatient mental health services by the number of people in the general population in that same age group during the Fiscal Year.

Formula:

Number of people who received outpatient mental health services during the Fiscal Year {0-17, 18-59, 60+}

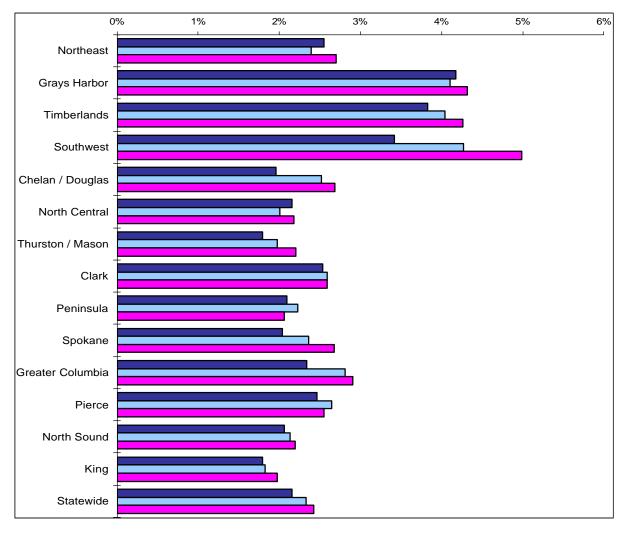
Number of people in the general population during the Fiscal Year {0-17, 18-59, 60+}

Discussion: The penetration rates by RSN and Statewide show the general population by age group for each RSN and the State. The number of youth and adults receiving mental health services has increased, while the number of older adults receiving mental health services has remained stable.

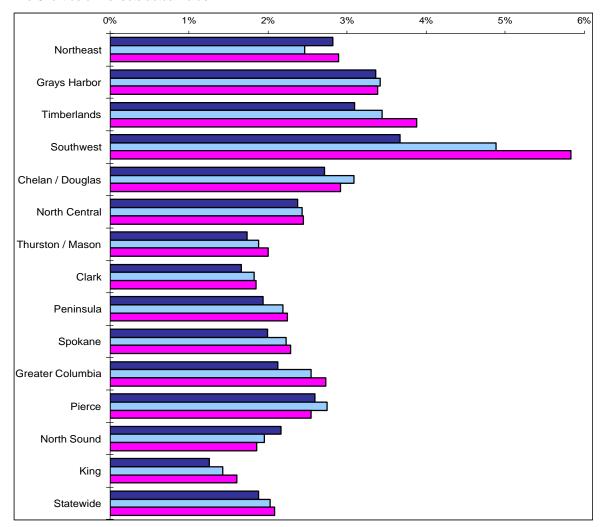
- Clark RSN has received additional funding to provide children's services.
- ▶ Age is calculated as of January 1st, yyyy for each Fiscal Year.
- Age counts are unduplicated.
- ▶ King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services are non-standard across the state.
- ▶ The State total is unduplicated clients across all RSNs (i.e., each person is only counted once in the Statewide total).
- The RSN count shows the number of unduplicated clients within each RSN (i.e., a person is counted once in <u>each</u> RSN where they receive services).
- The statewide count shows the number of unduplicated clients within the state (i.e. a person is counted only once in the state even if they received services at multiple RSNs).
- Counts are of people, not admissions, episodes, or units of service.
- Data source is Service Utilization database (data set = su2003).
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.
- Medicaid Penetration Rates on page 22.

Penetration Rate: General Population by Age - Youth (0-17 yrs) Access I. B. Calc. 4/2003 SAS **FY00 FY01 FY02 RSN** Served Population Served Population Rate Rate Served Population Northeast 488 19,106 2.6% 454 19,001 2.4% 508 18,803 2.7% **Grays Harbor** 721 17,251 4.2% 715 17,411 4.1% 742 17,187 <u>4.3%</u> Timberlands 903 23,601 3.8% 23,592 4.0% 1,001 23,493 4.3% 953 Southwest 852 24,905 3.4% 1,064 24,910 4.3% 1,236 24,764 5.0% 28,238 2.0% 28,172 2.5% 28,108 2.7% Chelan / Douglas 553 711 754 40,493 2.2% 40,619 2.0% 40,400 2.2% North Central 874 816 880 1,152 64,146 1.8% 64,272 2.0% Thurston / Mason 1,272 1,411 64,137 2.2% 102,296 2.6% Clark 2,506 98,985 2.5% 100,216 2.6% 2,593 2.650 Peninsula 81,372 2.1% 81,024 2.2% 80,594 2.1% 1,705 1,803 1,659 Spokane 2,195 107,500 2.0% 2,545 107,612 2.4% 107,287 2.7% 2,875 Greater Columbia 4,034 172,625 2.3% 4,851 172,845 2.8% 5,012 172,618 2.9% Pierce 190,569 2.5% 192,323 2.6% 193,578 2.6% 4,695 5,090 4,942 257,014 2.1% North Sound 5,243 254,406 2.1% 5,481 5,667 257,865 2.2% 391,885 1.8% King 7,013 390,646 1.8% 7,157 7,745 391,515 2.0% 32,601 Statewide 1,513,843 2.2% 35,392 1,520,895 2.3% 36,873 1,522,647

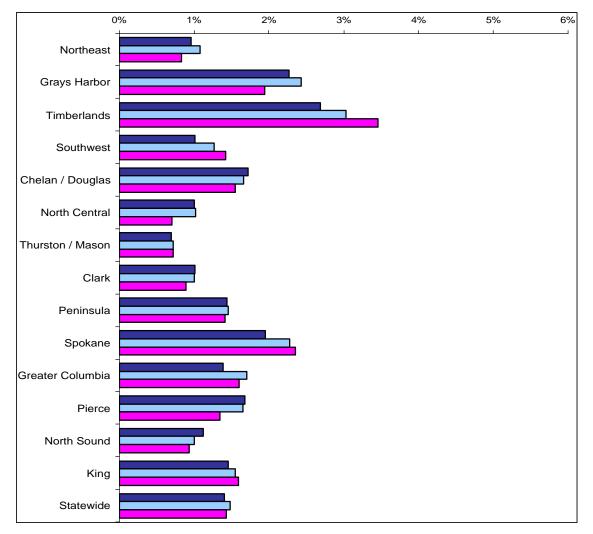
The Rates above are rounded to the nearest decimal.



Penetration Rate: General Population - Adults (18-59 yrs) Access I. B. Calc. 4/2003 SAS FY00 FY01 FY02 **RSN Population** Served Population Rate Served Population Rate Served 37,075 2.5% Northeast 1,036 36,728 2.8% 913 1,076 37,236 2.9% Grays Harbor 1,227 36,493 3.4% 1,278 37,335 3.4% 1,266 37,376 3.4% Timberlands 1,509 48,759 1,702 49,417 3.4% 49,923 3.9% 3.1% 1,938 Southwest 1,900 51,765 3.7% 2,564 52,471 4.9% 3,084 52,877 5.8% Chelan / Douglas 1,460 53,715 2.7% 1,674 54,260 3.1% 1,600 54,821 2.9% <u>1,734</u> North Central 1,645 69,238 2.4% 1,712 70,289 2.4% 70,808 2.4% Thurston / Mason 152,849 1.9% 2,616 150,573 1.7% 2,880 3,100 154,543 2.0% Clark 3,358 201,831 1.7% 3,780 206,748 1.8% 3,943 213,544 1.8% 4,058 Peninsula 3,561 183,899 1.9% 185,600 2.2% 4,201 187,135 2.2% Spokane 4,865 243,787 2.0% 5,510 247,105 2.2% 5,698 249,470 2.3% Greater Columbia 7,174 337,983 2.1% 8,711 342,324 2.5% 9,465 346,379 2.7% Pierce 10,747 414,860 2.6% 11,648 423,440 2.8% 10,978 431,136 2.5% North Sound 583,669 2.0% 12,376 570,893 2.2% 11,408 10,996 592,519 1.9% King 13,925 1,106,531 1.3% 16,063 1,122,212 1.4% 18,201 1,133,727 1.6% Statewide 65,920 3,507,055 1.9% 72,139 3,564,795 2.0% 75,313 3,611,493



Penetration Rate: General Population - Older Adults (60+ yrs) Access I. B. Calc.4/2003 SAS FY01 **FY00 FY02 RSN** Served Population Rate Served Population Rate Served Population 13,408 13,524 1.1% 13,660 0.8% Northeast 129 1.0% 146 114 Grays Harbor 305 13,450 2.3% 335 13,754 2.4% 269 13,837 1.9% 21,048 Timberlands 566 2.7% 645 21,291 3.0% 747 21,585 3.5% Southwest 16,278 1.0% 209 16,519 1.3% 239 16,759 1.4% 165 Chelan / Douglas 298 17,266 1.7% 290 17,468 1.7% 17,770 1.5% 275 21,292 1.0% North Central 211 20,959 1.0% 217 152 21,592 0.7% Thurston / Mason 294 42,041 42,679 0.7% 0.7% 306 314 43,420 0.7% 45,637 1.0% Clark 450 44,422 1.0% 458 422 47,560 0.9% Peninsula 824 57,176 1.4% 838 57,676 1.5% 828 58,471 1.4% 68,843 2.4% Spokane 1,302 2.0% 1,539 67,683 2.3% 1,620 66,652 Greater Columbia 1,235 89,122 1.4% 1,541 90,430 1.7% 1,472 92,103 1.6% 100,286 1.3% Pierce 1,602 95,391 1.7% 1,612 97,637 1.7% 1,346 North Sound 1,532 136,153 1.1% 1,393 139,418 1.0% 1,328 142,615 0.9% King 3,482 239,857 1.5% 3,779 244,203 1.5% 3,962 249,058 1.6% **Statewide** 12,301 873,223 1.4% 13,186 889,210 1.5% 12,963 907,560 1.4%



ACCESS I. Penetration Rates: General Population by Race/Ethnicity

C. Operational Definition: The proportion of people in the general population of different ethnic groups who received publicly funded outpatient mental health for a Fiscal Year.

Rationale for Use: Penetration rates by Race/Ethnicity provide information on the proportion of ethnic minorities who received mental health services compared to the rate of ethnic minorities in the general population, and allows comparison with other State mental health data to help understand access across the State mental health system.

Operational Measure: This is calculated by dividing the number of people who received mental health services in each Race/Ethnicity by the number of people in the general population in that same Race/Ethnicity in the Fiscal Year.

Formula:

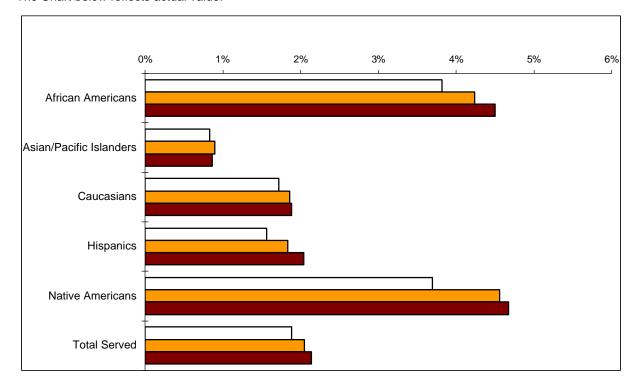
Number of people who received outpatient mental health services during the Fiscal Year {Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

Number of people in the general population during the Fiscal Year {Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

Discussion: The penetration rates for ethnic minorities show similar patterns across the three Fiscal Years. African Americans and Native Americans have a higher penetration rate than other ethnic minority groups. RSN rates show a similar pattern. It is important to note this graph uses the same population numbers across the three years. The actual penetration rates may be slightly higher in Fiscal Year 2001 and Fiscal Year 2002 than reflected in this report. However, the pattern should remain stable.

- Race/ethnicity is calculated using the data elements of ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In CY2002 multiracial is included in the other category.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used.
- State totals include individuals with ethnicity listed as "other" and who have no ethnicity reported.
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Because Fiscal Year 2001 and Fiscal Year 2002 OFM estimates for ethnicity breakouts were not available at the time of this report, Fiscal Year 2000 census numbers are used.
- ▶ King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- The State total is unduplicated clients across all RSNs (i.e., each person is only counted once in the Statewide total).
- The RSN count shows the number of unduplicated clients within each RSN (i.e., a person is counted once in <u>each</u> RSN where they receive services).
- Decounts are of people, not admissions, episodes, or units of service.
- Data source is Service Utilization database (data set = su2003).

Penetration Rate: General Population by Race/Ethnicity									
Access I. C.								Calc.4/20	03 SAS
Race/Ethnicity FY00				FY01			FY02		
reace, Ethinoley	Served	Population	Rate	Served	Population	Rate	Served	Population	Rate
African Americans	7,042	184,631	3.8%	7,821	184,631	4.2%	8,314	184,631	4.5%
Asian/Pacific Islanders	2,840	342,180	0.8%	3,071	342,180	0.9%	2,956	342,180	0.9%
Caucasians	80,063	4,652,490	1.7%	86,383	4,652,490	1.9%	87,549	4,652,490	1.9%
Hispanics	6,891	441,509	1.6%	8,114	441,509	1.8%	9,004	441,509	2.0%
Native Americans	3,152	85396	3.7%	3,891	85,396	4.6%	3,992	85,396	4.7%
Total Served	111,131	5,894,121	1.9%	120,717	5,894,121	2.0%	126,069	5,894,121	2.1%



ACCESS II. Penetration Rates: Medicaid Population

A. Operational Measure: The proportion of people in the Medicaid population who received publicly funded outpatient mental health services by RSN and Statewide for a Fiscal Year.

Rationale: Penetration rates for the Medicaid population provide information on the number of Medicaid enrollees who received one or more mental health services relative to the State Medicaid population. Penetration rates also provide information on whether the system is responsive to the Medicaid population and allows comparison with other State mental health data to help understand access across the State mental health system.

Operational Measure: This is calculated by dividing the number of Medicaid enrollees who received outpatient mental health services by the number of people in the Medicaid population during a Fiscal Year.

Formula:

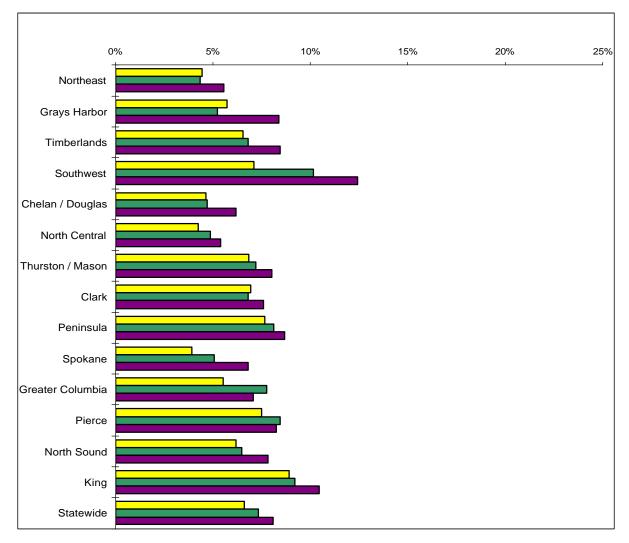
Number of Medicaid enrollees who received outpatient mental health services during the Fiscal Year

Number of people in the Medicaid population in the Fiscal Year

Discussion: The penetration rates by RSN and Statewide show the Medicaid population of each RSN and the State compared to the Medicaid enrollees served in Fiscal Year 2000 and Fiscal Year 2001. In this measure, each Medicaid enrolled person is counted only once, even if he/she uses more than one service. The table shows an overall increase in the number of people in the Medicaid population receiving mental health services.

- A client is considered to be in the Medicaid enrolled population for the entire Fiscal Year if they received any amount of Medicaid funded service during that Fiscal Year.
- Data source is Service Utilization database (data set = su2003). Data source for counting the number of people in the Medicaid population is the MHD Ad Hoc system.
- King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- The State total is unduplicated clients across all RSNs (i.e., each person is only counted once in the Statewide total).
- The RSN count shows the number of unduplicated clients within each RSN (i.e., a person is counted once in <u>each</u> RSN where they receive services).
- Counts are of people, not admissions, episodes, or units of service.

Penetration Rate - Medicaid Population									
Access II. A.								Calc. 5/20	003 SAS
RSN	<u> </u>	FY00			FY01			FY02	
KON	Served	Enrolled	Rate	Served	Enrolled	Rate	Served	Enrolled	Rate
Northeast	784	17,605	4.5%	789	18,131	4.4%	1,007	18,102	5.6%
Grays Harbor	995	17,395	5.7%	913	17,433	5.2%	1,423	16,969	8.4%
Timberlands	1,428	21,778	6.6%	1,525	22,394	6.8%	1,875	22,184	8.5%
Southwest	1,478	20,781	7.1%	2,172	21,359	10.2%	2,731	21,960	12.4%
Chelan / Douglas	906	19,502	4.6%	964	20,482	4.7%	1,289	20,878	6.2%
North Central	1,585	37,143	4.3%	1,858	38,165	4.9%	2,104	39,039	5.4%
Thurston / Mason	2,828	41,294	6.8%	3,089	42,796	7.2%	3,364	41,914	8.0%
Clark	3,993	57,406	7.0%	4,205	61,562	6.8%	4,816	63,262	7.6%
Peninsula	3,739	48,717	7.7%	4,005	49,222	8.1%	4,194	48,329	8.7%
Spokane	3,250	82,678	3.9%	4,377	86,152	5.1%	6,054	88,808	6.8%
Greater Columbia	7,885	142,228	5.5%	11,450	147,159	7.8%	10,660	150,413	7.1%
Pierce	9,215	122,683	7.5%	10,593	125,340	8.5%	10,324	125,019	8.3%
North Sound	8,017	129,254	6.2%	8,917	137,626	6.5%	11,183	142,840	7.8%
King	18,954	212,626	8.9%	19,912	216,439	9.2%	22,669	217,002	10.4%
Statewide	64,223	971,090	6.6%	73,758	1,004,260	7.3%	82,361	1,016,719	8.1%



ACCESS II. Penetration Rates: Medicaid Population by Age

B. Operational Definition: The proportion of youth, adults, and older adults in the Medicaid population who received publicly funded outpatient mental health services by RSN for a Fiscal Year

Rationale for Use: Penetration rates for the Medicaid population by age group provide information on the number of children, adults, and older adults who were Medicaid enrolled and received one or more mental health services. This provides information on whether the system is responsive to various age groups within the Medicaid population and allows comparisons to other State mental health data to help understand access across the State mental health system.

Operational Measure: This is calculated by dividing the number of Medicaid enrollees in each age group who received outpatient mental health services during the Fiscal Year by the number of people in the general Medicaid population in that same age group.

Formula:

Number of Medicaid enrollees who received outpatient mental health services during the Fiscal Year {0-17, 18-59, 60+}

Number of people in the Medicaid population during the Fiscal Year {0-17, 18-59, 60+}

Discussion: The table shows that overall Medicaid enrolled adults have a higher penetration rate than either youth or older adults. This is noticeable because more children receive Medicaid, yet fewer of them are receiving mental health services through the RSNs.

- Clark RSN has received additional funding to provide children's services.
- Age is calculated as of January 1, for each Fiscal Year.
- A client is considered Medicaid enrolled for the entire Fiscal Year if they received any amount of Medicaid funded service during the Fiscal Year.
- Data source for Medicaid enrolled and served is Service Utilization database (data set = su2003).
- Data source for counting number of people in the Medicaid population is MHD Ad Hoc system. Age breakouts of the Medicaid population are not available prior to Fiscal Year 2001.
- King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- ▶ The State total is unduplicated clients across all RSNs (i.e., each person is only counted once in the Statewide total).
- The RSN count shows the number of unduplicated clients within each RSN (i.e., a person is counted once in each RSN where they receive services).
- Counts are of people, not admissions, episodes, or units of service.

Penetration Rate: Medicaid Population by Age Group: Youth (0-17 yrs) Access II. B. Calc. 5/2003 SAS FY01 **FY02 RSN** Served **Enrolled Rate** Served **Enrolled Rate** 10,767 2.7% 10,760 3.4% Northeast 286 369 **Grays Harbor** 342 9,650 3.5% 577 9,676 6.0% Timberlands 666 13,309 5.0% 721 12,915 5.6% Southwest 775 12,240 6.3% 922 12,586 7.3% Chelan / Douglas 398 13,666 2.9% 507 13,969 3.6% North Central 612 24,904 2.5% 693 25,632 2.7% Thurston / Mason 1,133 25,370 4.5% 1,239 25,081 4.9% Clark 1,705 37,798 4.5% 1,968 39,557 5.0% 28,274 4.2% 27,718 4.2% Peninsula 1,178 1,162 3.7% Spokane 51,452 1,825 49,354 2,234 4.3% Greater Columbia 3,847 94,440 4.1% 3,779 96,974 3.9% Pierce 3,399 73,367 4.6% 3,388 73,737 4.6% North Sound 4.3% 86,558 4.9% 3,610 83,530 4,266 5.1% 120,524 King 6,165 120,711 6,500 5.4%

597,380 4.3%

27,984

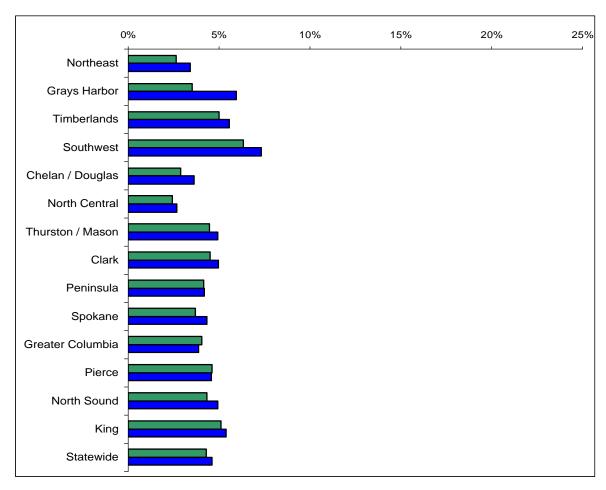
607,139 4.6%

The Rates above are rounded to the nearest decimal.

25,698

The Chart below reflects actual value.

Statewide

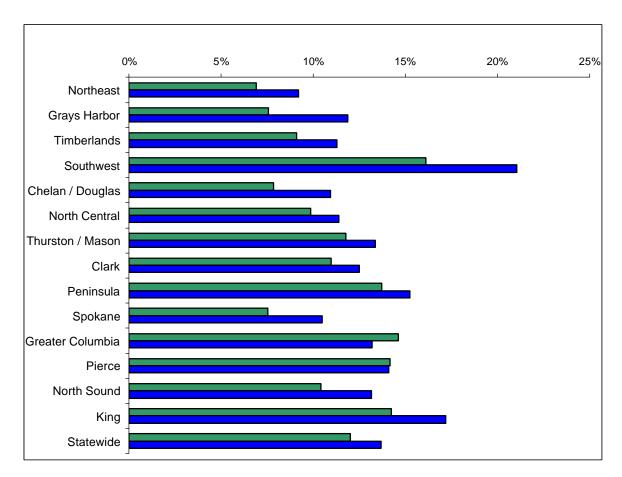


Penetration Rate: Medicaid Population by Age Group: Adults (18-59 yrs)

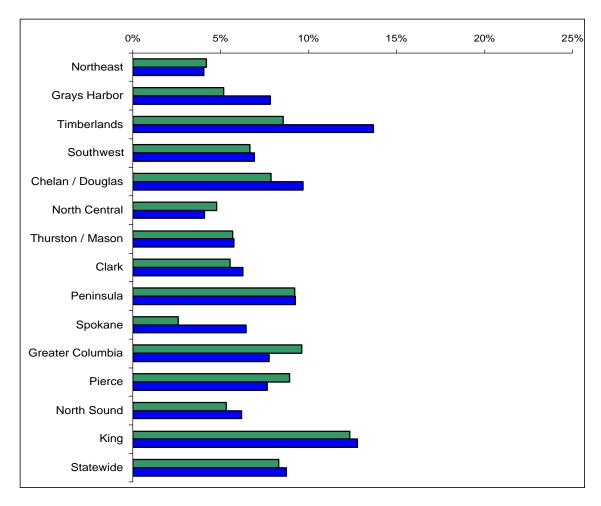
Access II. B. Calc. 5/2003 SAS

RSN		<u>FY01</u>		<u>FY02</u>				
KON	Served	Enrolled	Rate	Served	Enrolled	Rate		
Northeast	440	6,386	6.9%	575	6,266	9.2%		
Grays Harbor	474	6,282	7.5%	717	6,043	11.9%		
Timberlands	709	7,792	9.1%	866	7,681	11.3%		
Southwest	1,296	8,038	16.1%	1,684	7,998	21.1%		
Chelan / Douglas	454	5,798	7.8%	634	5,796	10.9%		
North Central	1,121	11,382	9.8%	1,297	11,398	11.4%		
Thurston / Mason	1,778	15,120	11.8%	1,943	14,522	13.4%		
Clark	2,260	20,617	11.0%	2,574	20,601	12.5%		
Peninsula	2,433	17,747	13.7%	2,613	17,161	15.2%		
Spokane	2,367	31,545	7.5%	3,354	32,023	10.5%		
Greater Columbia	6,621	45,318	14.6%	6,038	45,752	13.2%		
Pierce	6,312	44,547	14.2%	6,140	43,541	14.1%		
North Sound	4,684	44,962	10.4%	6,132	46,643	13.1%		
King	10,646	74,842	14.2%	12,806	74,505	17.2%		
Statewide	40,886	340,376	12.0%	46,452	339,930	13.7%		

The Rates above are rounded to the nearest decimal.



Penetration Rate: Medicaid Population by Age Group: Older Adults (60+ yrs)									
Access II. B.					Cal. 5/2	003 SAS			
RSN	<u>F</u>	<u>Y01</u>			FY02				
NO.	Served	Enrolled	Rate	Served	Enrolled	Rate			
Northeast	61	1,462	4.2%	62	1,530	4.1%			
Grays Harbor	97	1,876	5.2%	129	1,644	7.8%			
Timberlands	150	1,752	8.6%	287	2,096	13.7%			
Southwest	97	1,458	6.7%	121	1,754	6.9%			
Chelan / Douglas	112	1,421	7.9%	148	1,528	9.7%			
North Central	125	2,609	4.8%	113	2,769	4.1%			
Thurston / Mason	177	3,113	5.7%	182	3,172	5.7%			
Clark	234	4,226	5.5%	269	4,285	6.3%			
Peninsula	386	4,186	9.2%	407	4,402	9.2%			
Spokane	179	6,913	2.6%	463	7,191	6.4%			
Greater Columbia	977	10,163	9.6%	829	10,699	7.7%			
Pierce	877	9,831	8.9%	780	10,215	7.6%			
North Sound	622	11,719	5.3%	771	12,459	6.2%			
King	3,097	25,120	12.3%	3,348	26,223	12.8%			
Statewide	7,132	85,849	8.3%	7,864	89,967	8.7%			



ACCESS III. Penetration Rates: Community Inpatient: Per 1000 General Population

A. Operational Definition: Proportion of people served in Community Hospitals and Evaluation and Treatment Centers by RSN and Statewide per 1000 population for a Fiscal Year.

Rationale for Use: The penetration rate per 1000 people provides information on the use of a high cost service – community psychiatric inpatient hospitalization. Community Hospital and Evaluation and Treatment Center (E & T) services are an important component of care for people with acute psychiatric needs.

Operational Measures: The total number of people served in Community Hospitals and E&Ts in the Fiscal Year divided by the general population, multiplied by 1000.

Formula:

Number of people served (CH, E&T) in the Fiscal Year

X 1000

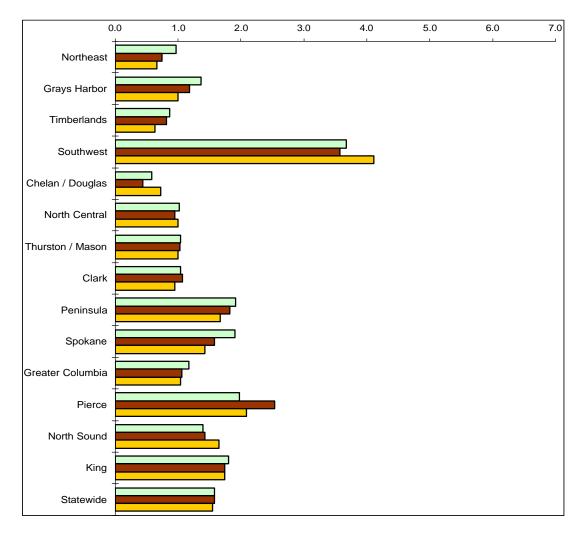
Number of people in the general population in the Fiscal Year

Discussion: The inpatient penetration rates show the number of people served in Community Hospitals and E&Ts per 1,000 people by RSN and Statewide. There have been reports of community hospital bed closures in some communities. Bed closures may be associated with decreased penetration rates in some RSNs. However, the overall penetration rate has remained stable across the three years.

- **E** & T services are only provided by Peninsula, King and North Sound RSN.
- Data reported are based on RSN report and include the most recent dispute resolutions available at the time of publication.
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.
- Counts are of people, not admissions, episodes, or units of service.
- Counts are unduplicated across Community Hospitals and E&Ts and include the most recent dispute resolutions available at the time of publication.
- Community hospital data is based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from calculations.
- Data source is Service Utilization database (data set = su2003).

Penetration Rate: Community Inpatient: Per 1000 General Population Access III. A. Calc. 7/2003 SAS **FY00 FY01 FY02 RSN** Served Population Rate Served **Population Rate** Served **Population Rate** 69,242 1.0 52 69,600 46 69,700 0.7 Northeast 67 **Grays Harbor** 92 67,194 1.4 81 68,500 68 68,400 1.0 1.2 95,000 Timberlands 81 93,408 0.9 77 94,300 0.8 60 0.6 Southwest 341 92,948 93,900 388 94,400 3.7 335 3.6 4.1 Chelan / Douglas 99,219 100,700 58 0.6 44 99,900 0.4 73 0.7 North Central 133 130,690 1.0 125 132,200 0.9 132 132,800 1.0 Thurston / Mason 267 256,760 259,800 262,100 1.0 266 1.0 262 1.0 Clark 357 345,238 1.0 376 352,600 1.1 346 363,400 1.0 Peninsula 617 322,447 1.9 590 324,300 544 326,200 1.7 Spokane 795 1.9 665 417,939 422,400 1.6 606 425,600 1.4 Greater Columbia 703 599,730 1.2 644 605,600 634 611,100 1.1 1.0 Pierce 1,383 700,820 2.0 1,807 713,400 2.5 1,512 725,000 2.1 North Sound 961,452 1,397 980,100 1,638 993,000 1.6 1,342 1.4 1.4 King 3,126 1,737,034 1.8 3,052 1,758,300 3,094 1,774,300 1.7 Statewide 9,304 5,894,121 5,974,900 1.6 9,424 1.6 9,370 6,041,700 1.6

The Rates above are rounded to the nearest decimal.



ACCESS III. Penetration Rates: Community Inpatient by Age per 1000

B. Operational Definition: The proportion of youth, adults, and older adults who received service in Community Hospitals and E&Ts per 1000 age group for a Fiscal Year.

Rationale for Use: The penetration rate per 1000 people provides information on the use of a high cost service – community psychiatric inpatient hospitalization. Community Hospital and Evaluation and Treatment Center (E & T) services are an important component of care for people with acute psychiatric needs. Examining this data by age provides an additional understanding of the differences in acute services delivered to children, adults, and older adults.

Operational Measures: The total number of people served in Community Hospitals and E&Ts in the Fiscal Year for each age group divided by the general population of each age group multiplied by 1000.

Formula:

Number of people served (CH, E&T) in the Fiscal Year by age group

{0-17, 18-59, 60+}

X 1000

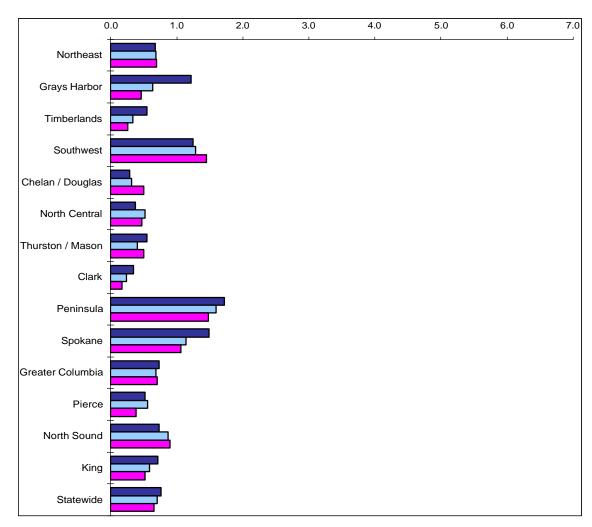
Number of people in general population by age group in the Fiscal Year

{0-17, 18-59, 60+}

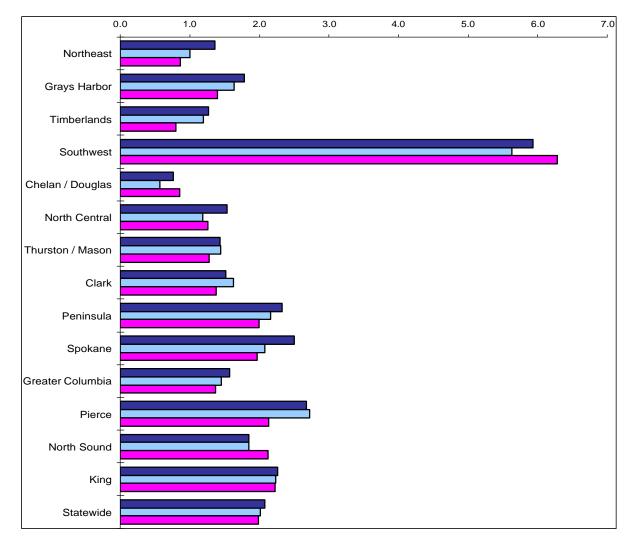
Discussion: The inpatient hospital penetration rates by age group show the number of children, adults, and older adults served in Community Hospitals and Evaluation and Treatment Centers. The tables show that the proportion of adults receiving inpatient services is higher than either the proportion of children or older adults served. This is consistent with the finding of higher penetration rates for adult Medicaid enrollees overall.

- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.
- ▶ E & T services are only provided by Peninsula, King and North Sound RSN. Data included in this report are based on RSN report. Peninsula has an adolescent E&T and King and North Sound have adult E&Ts.
- Age is calculated as of January 1st for each Fiscal Year.
- Community hospital data is based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from calculations.
- Counts are unduplicated across Community Hospitals and E&Ts.
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.
- Counts are of people, not admissions, episodes, or units of service.
- Data source is Service Utilization database (data set = su2003).

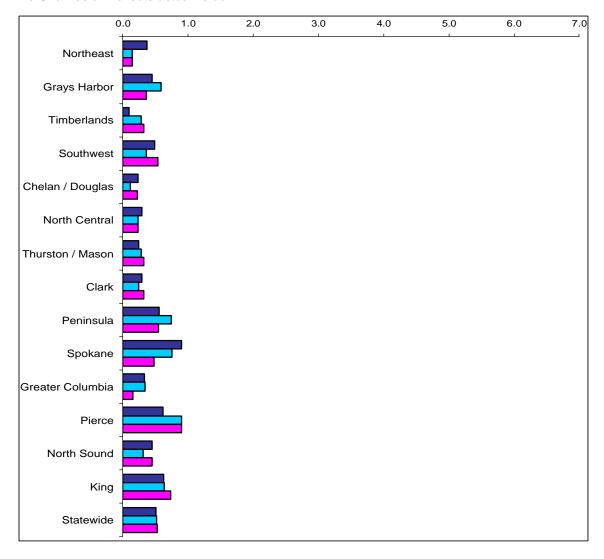
Penetration Rate: Community Inpatient: Per 1000 Youth (0-17 yrs)									
Access III. B. Calc. 3/2003 SAS									
RSN		FY00			FY01			FY02	
	Served	Population	Rate	Served	Population	Rate	Served	Population	Rate
Northeast	13	19,106	0.7	13	19,001	0.7	13	18,803	0.7
Grays Harbor	21	17,251	1.2	11	17,411	0.6	8	17,187	0.5
Timberlands	13	23,601	0.6	8	23,592	0.3	6	23,493	0.3
Southwest	31	24,905	1.2	32	24,910	1.3	36	24,764	1.5
Chelan / Douglas	8	28,238	0.3	9	28,172	0.3	14	28,108	0.5
North Central	15	40,493	0.4	21	40,619	0.5	19	40,400	0.5
Thurston / Mason	35	64,146	0.5	26	64,272	0.4	32	64,137	0.5
Clark	34	98,985	0.3	24	100,216	0.2	18	102,296	0.2
Peninsula	140	81,372	1.7	129	81,024	1.6	119	80,594	1.5
Spokane	160	107,500	1.5	123	107,612	1.1	114	107,287	1.1
Greater Columbia	127	172,625	0.7	119	172,845	0.7	122	172,618	0.7
Pierce	99	190,569	0.5	108	192,323	0.6	74	193,578	0.4
North Sound	186	254,406	0.7	224	257,014	0.9	232	257,865	0.9
King	278	390,646	0.7	232	391,885	0.6	203	391,515	0.5
Statewide	1,155	1,513,843	0.8	1,064	1,520,895	0.7	1,000	1,522,647	0.7



Penetration Rate: Community Inpatient: Per 1000 Adults (18-59 yrs)									
Access III. B. Calc. 3/2003 SAS									
RSN		FY00_			FY01			FY02	
ROR	Served	Population	Rate	Served	Population	Rate	Served	Population	Rate
Northeast	50	36,728	1.4	37	37,075	1.0	32	37,236	0.9
Grays Harbor	65	36,493	1.8	61	37,335	1.6	52	37,376	1.4
Timberlands	62	48,759	1.3	59	49,417	1.2	40	49,923	0.8
Southwest	307	51,765	5.9	295	52,471	5.6	332	52,877	6.3
Chelan / Douglas	41	53,715	0.8	31	54,260	0.6	47	54,821	0.9
North Central	106	69,238	1.5	83	70,289	1.2	89	70,808	1.3
Thurston / Mason	215	150,573	1.4	221	152,849	1.4	198	154,543	1.3
Clark	306	201,831	1.5	337	206,748	1.6	295	213,544	1.4
Peninsula	427	183,899	2.3	401	185,600	2.2	373	187,135	2.0
Spokane	609	243,787	2.5	513	247,105	2.1	490	249,470	2.0
Greater Columbia	532	337,983	1.6	496	342,324	1.4	475	346,379	1.4
Pierce	1,111	414,860	2.7	1,152	423,440	2.7	920	431,136	2.1
North Sound	1,054	570,893	1.8	1,079	583,669	1.8	1,260	592,519	2.1
King	2,498	1,106,531	2.3	2,505	1,122,212	2.2	2,517	1,133,727	2.2
Statewide	7,273	3,507,055	2.1	7,167	3,564,795	2.0	7,153	3,611,493	2.0



Penetration Rate: Community Inpatient - Per 1000 Older Adults (60+ yrs)										
Access III. B. Calc. 3/2003 SAS										
RSN		FY00			FY01			FY02		
KON	Served	Population	Rate	Served	Population	Rate	Served	Population	Rate	
Northeast	5	13,408	0.4	2	13,524	0.1	2	13,660	0.1	
Grays Harbor	6	13,450	0.4	8	13,754	0.6	5	13,837	0.4	
Timberlands	2	21,048	0.1	6	21,291	0.3	7	21,585	0.3	
Southwest	8	16,278	0.5	6	16,519	0.4	9	16,759	0.5	
Chelan / Douglas	4	17,266	0.2	2	17,468	0.1	4	17,770	0.2	
North Central	6	20,959	0.3	5	21,292	0.2	5	21,592	0.2	
Thurston / Mason	10	42,041	0.2	12	42,679	0.3	14	43,420	0.3	
Clark	13	44,422	0.3	11	45,637	0.2	15	47,560	0.3	
Peninsula	32	57,176	0.6	43	57,676	0.7	32	58,471	0.5	
Spokane	60	66,652	0.9	51	67,683	0.8	33	68,843	0.5	
Greater Columbia	29	89,122	0.3	31	90,430	0.3	14	92,103	0.2	
Pierce	59	95,391	0.6	88	97,637	0.9	90	100,286	0.9	
North Sound	61	136,153	0.4	43	139,418	0.3	64	142,615	0.4	
King	150	239,857	0.6	156	244,203	0.6	182	249,058	0.7	
Statewide	444	873,223	0.5	464	889,210	0.5	481	907,560	0.5	



ACCESS III. Penetration Rates: Community Inpatient by Race/Ethnicity per 1000

C. Operational Definition: The proportion of ethnic minorities who received service in Community Hospitals and E&Ts per 1000 ethnic minority for a Fiscal Year.

Rationale for Use: The penetration rate per 1000 people provides information on the use of a high cost service – community psychiatric inpatient hospitalization. Community Hospital and Evaluation and Treatment Center (E & T) services are an important component of care for people with acute psychiatric needs. Examining this data by Race/Ethnicity provides an additional understanding of the differences in acute services delivered to different ethnic minority groups.

Operational Measures: The total number of people served in Community Hospitals and E&Ts in the Fiscal Year for each ethnic minority divided by the general population of each ethnic minority multiplied by 1000.

Formula:

Number of people served (CH, E&T) in the Fiscal Year by Race/Ethnicity {Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

X 1000

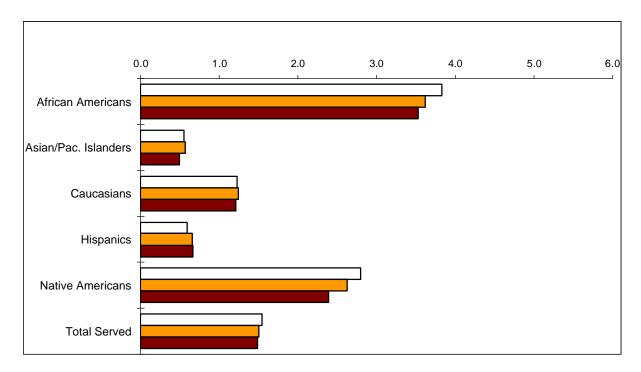
Number of people in general population for each ethnic minority {Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

Discussion: The table shows the penetration rates for ethnic minorities are stable across the three Fiscal Years. It is important to note that this graph uses the same population numbers across the three years. More African Americans and Native Americans received inpatient services than other ethnic minority groups. The actual penetration rates may be slightly higher in Fiscal Year 2001 and Fiscal Year 2002 than reflected in this report. However, the pattern should remain stable.

- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Because Fiscal Year 2001 and Fiscal Year 2002 OFM estimates for ethnicity breakouts were not available at the time of this report, Fiscal Year 2000 census numbers are used.
- ▶ E & T services are only provided by Peninsula, King and North Sound RSN. Data reported is based on RSN report.
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.
- There have been reports of community hospital bed closures in some communities. Bed closures may be associated with decreased penetration rates.
- Race/ethnicity is calculated using the data elements of Ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In CY2002 multiracial is included in the other category.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used.
- State totals include individuals with ethnicity listed as "other".
- Counts are of people, not admissions, episodes, or units of service. .
- Counts are unduplicated across Community Hospitals and E&T.
- Community hospital data based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from calculations.
- Data source is Service Utilization database (data set = su2003).

Penetration Rate: Community Inpatient by Race/Ethnicity per 1000 Access III. C. Calc. 3/2003 SAS **FY00 FY01 FY02** Race/Ethnicity Served Population Rate Served Population Rate **Served Population Rate** African Americans 707 184,631 3.8 668 184,631 3.6 651 184,631 3.5 Asian/Pac. Islanders 342,180 0.5 342,180 0.6 170 342,180 0.5 188 195 1.2 Caucasians 5,691 4,652,490 1.2 5,768 4,652,490 5,632 4,652,490 1.2 Hispanics 260 441,509 0.6 289 441,509 0.7 292 441,509 0.7 Native Americans 239 85,396 2.8 224 85,396 2.6 204 85,396 2.4 **Total Served** 9,107 5,894,121 1.5 8,883 5,894,121 1.5 8,778 5,894,121

The Rates above are rounded to the nearest decimal.



ACCESS III. Penetration Rates: State Hospital by Age per 1000

D. Operational Definition: Number of people served in Children's Long Term Inpatient (CLIP) facilities and State Hospitals per 1000 age group for a Fiscal Year.

Rationale for Use: The number of people served in State Hospitals and CLIP facilities per 1000 people provides information on the use of a high cost service, long-term psychiatric inpatient hospitalization. Examining this data by age provides an additional understanding of the differences in long-term hospitalization services delivered to youth, adults, and older adults

Operational Measures: The total number of people served in State Hospitals and CLIP by age group during the Fiscal Year Statewide divided by the general population of each age group, multiplied by 1000.

Formula:

Number of people served in State Hospitals (SH, CLIP) by age group in the Fiscal Year

{0-17, 18-59, 60+}

X 1000

Number of people in the general population by age group {0-17, 18-59, 60+}

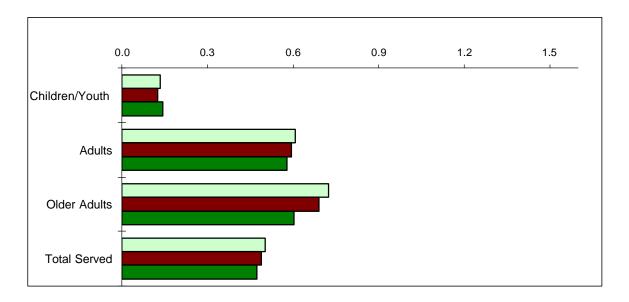
Discussion: CLIP facilities serve only children. Eastern State Hospital eliminated 28 beds in 2002 and Western State Hospital and the PALS program eliminated 150 beds in 2001 and 2002, for a total reduction in state hospital beds of approximately 178 beds over a two year period (Expanded Community Services (ECS) Project Overview, 3/26/03). These bed reductions may impact the penetration rate.

The table shows that the proportion of children/youth served in CLIP facilities remains small. The table also shows a very slight decrease in the proportion of adults, and served in state hospitals over the three year time period.

- CLIP facilities do not serve children under the age of 5.
- ▶ CLIP facilities include: Child Study & Treatment Center, Martin Center, McGraw Center, Pearl Street Center and Tamarack Center.
- For a copy of the ECS Project Overview, contact Andy Toulon at the Mental Health Division.
- Age is calculated as of January 1st for each Fiscal Year.
- Counts are of people, not admissions, episodes, or units of service.
- Data Source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS).
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.

Penetration Rates: State Hospitals and CLIP Facilities by Age Group per Access III. D. Calc. 3/2003 SAS **FY00 FY01 FY02 Age Group** Served Population Rate Served **Population Rate** Served Population Rate Children/Youth 202 1,513,843 0.1 192 1,520,895 0.1 219 1,522,647 0.1 Adults 2,129 3,507,055 0.6 2,119 3,564,795 0.6 2,092 3,611,493 0.6 Older Adults 632 873,223 0.7 614 889,210 0.7 547 907,560 0.6 **Total Served** 2,963 5,894,121 0.5 2,925 5,974,900 0.5 2,859 6,041,700 0.5

The Rates above are rounded to the nearest decimal.



ACCESS III. Penetration Rates: State Hospital by Race/Ethnicity

E. Operational Definition: Number of people served in State Hospitals and Children's Long-term Inpatient (CLIP) facilities by 1000 ethnic minority group for a Fiscal Year.

Rationale for Use: This indicator provides information on the use of a high cost service – long-term psychiatric inpatient hospitalization. Examining this data by Race/Ethnicity provides an additional understanding of the differences in long-term hospitalization services delivered to different ethnic minority groups.

Operational Measures: The number of people served in State Hospitals and CLIP during the Fiscal Year for each Race/Ethnicity divided by the total population of each ethnic group, multiplied per 1000.

Formula:

Number of people served (SH, CLIP) in the Fiscal Year by Race/Ethnicity { Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

X 1000

Number of people in general population for each Race/Ethnicity in a Fiscal Year { Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

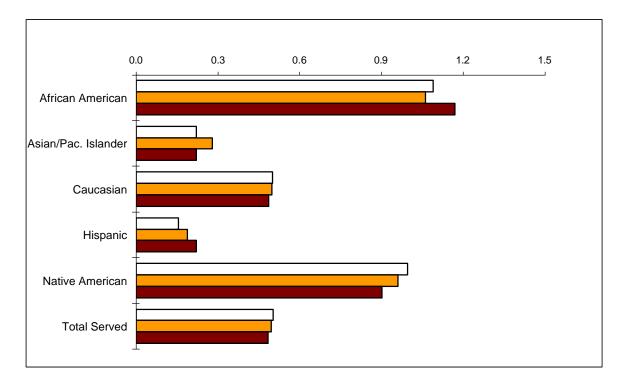
Discussion: The table shows that a greater proportion of African Americans and Native Americans are served by State Hospital and CLIP facilities than any other ethnic minority group. However, using the same population numbers across the 3 years assumes that the population has not increased over time which may lead to inflated penetration rates for Fiscal Year 2001 and Fiscal Year 2002 compared to what they would be with updated census numbers.

Eastern State Hospital eliminated 28 beds in 2002 and Western State Hospital and the PALS program eliminated 150 beds in 2001 and 2002, for a total reduction in state hospital beds of approximately 178 beds over a two year period (ECS Project Overview, 3/26/03). These bed reductions may impact the penetration rate.

- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Because Fiscal Year 2001 and Fiscal Year 2002 OFM estimates for ethnicity breakouts were not available at the time of this report, Fiscal Year 2000 census numbers are used.
- CLIP facilities do not serve children under the age of 5.
- CLIP facilities include: Child Study & Treatment Center, Martin Center, McGraw Center, Pearl Street Center and Tamarack Center.
- ▶ Eastern State Hospital eliminated 28 beds in 2002 and Western State Hospital and the PALS program eliminated 150 beds in 2001 and 2002, for a total reduction in state hospital beds of approximately 178 beds over a two-year period.
- Race/ethnicity is calculated using the data elements of ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In CY2002 multiracial is included in the other category.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used
- Counts are people.
- Data Source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS).

Penetration Rates: State Hospitals General Population by Race/Ethnicity per 1000 Access III. E. Calc. 3/2003 SAS **FY00 FY01 FY02** Race/Ethnicity Population Rate Served Population Rate Served **Population Rate** Served African American 201 184,631 1.1 196 184,631 1.1 216 184,631 1.2 96 Asian/Pac. Islander 76 342,180 0.2 342,180 0.3 76 342,180 0.2 2,328 Caucasian 4,652,490 2,319 4,652,490 2,263 4,652,490 0.5 0.5 0.5 Hispanic 441,509 0.2 69 441,509 0.2 83 0.2 441,509 98 Native American 85,396 85,396 85,396 85 1.0 82 1.0 77 0.9 **Total Served** 2,963 5,894,121 0.5 2,925 5,894,121 2,859 5,894,121 0.5 0.5

The Rates above are rounded to the nearest decimal.



ACCESS III. Penetration Rates: State Hospital by RSN per 1000

F. Operational Definition: Number of adults (18 years or older) served in State Hospitals per 1000 by RSN for a Fiscal Year.

Rationale for Use: The number of adults (18 years or older) served in State Hospitals and per 1000 people provides information on the use of a high cost service, long-term psychiatric inpatient hospitalization.

Operational Measures: The total number of adults (18 years or older) served in State Hospitals by RSN during the Fiscal Year divided by the general population of adults, multiplied by 1000.

Formula:

Number of adults (18 years or older) served in State Hospitals by RSN in the Fiscal Year X 1000

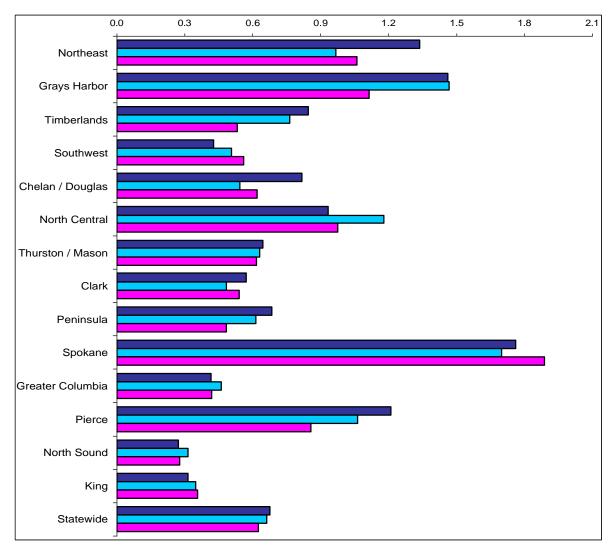
Number of adults (18 years or older) in the general population by RSN

Discussion: The table shows the number of adults served in Eastern and Western State Hospitals by RSN. Eastern State Hospital eliminated 28 beds in 2002 and Western State Hospital and the PALS program eliminated 150 beds in 2001 and 2002, for a total reduction in state hospital beds of approximately 178 beds over a two year period (ECS Project Overview, 3/26/03). These bed reductions may impact the penetration rate.

- For a copy of the ECS Project Overview, contact Andy Toulon at the Mental Health Division.
- Age is calculated as of January 1st for each Fiscal Year.
- Counts are of people, not admissions, episodes, or units of service.
- Data Source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS).
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.

Penetration Rate: State Hospital - Per 1000 Adults (18 yrs or older)												
Access III. F.	Access III. F. Calc. 5/2003 SAS											
RSN		FY00			FY01			FY02				
KON	Served	Population	Rate	Served	Population	Rate	Served	Population	Rate			
Northeast	67	50,136	1.3	49	50,599	1.0	54	50,897	1.1			
Grays Harbor	73	49,943	1.5	75	51,089	1.5	57	51,213	1.1			
Timberlands	59	69,807	0.8	54	70,708	0.8	38	71,507	0.5			
Southwest	29	68,043	0.4	35	68,990	0.5	39	69,636	0.6			
Chelan / Douglas	58	70,981	0.8	39	71,728	0.5	45	72,592	0.6			
North Central	84	90,197	0.9	108	91,581	1.2	90	92,400	1.0			
Thurston / Mason	124	192,614	0.6	123	195,528	0.6	122	197,963	0.6			
Clark	141	246,253	0.6	122	252,384	0.5	141	261,104	0.5			
Peninsula	165	241,075	0.7	149	243,276	0.6	119	245,606	0.5			
Spokane	547	310,439	1.8	535	314,788	1.7	601	318,313	1.9			
Greater Columbia	178	427,105	0.4	199	432,755	0.5	184	438,482	0.4			
Pierce	618	510,251	1.2	554	521,077	1.1	455	531,422	0.9			
North Sound	192	707,046	0.3	227	723,086	0.3	204	735,135	0.3			
King	424	1,346,388	0.3	475	1,366,415	0.3	494	1,382,785	0.4			
Statewide	2,963	4,380,278	0.7	2,948	4,454,005	0.7	2,820	4,519,053	0.6			

The Rates above are rounded to the nearest decimal.



ACCESS IV. Outpatient Utilization Rates: General Population

A. Operational Definition: Average number of outpatient service hours per consumer by RSN for a Fiscal Year.

Rationale for Use: The average number of hours of outpatient services for each consumer per Fiscal Year provides information on the average amount of services received. Combined with penetration rate, the utilization rate describes the intensity of mental health service delivery.

Operational Measure: This is calculated by dividing the total number of outpatient hours by the total number of people receiving outpatient services in a Fiscal Year.

Formulas:

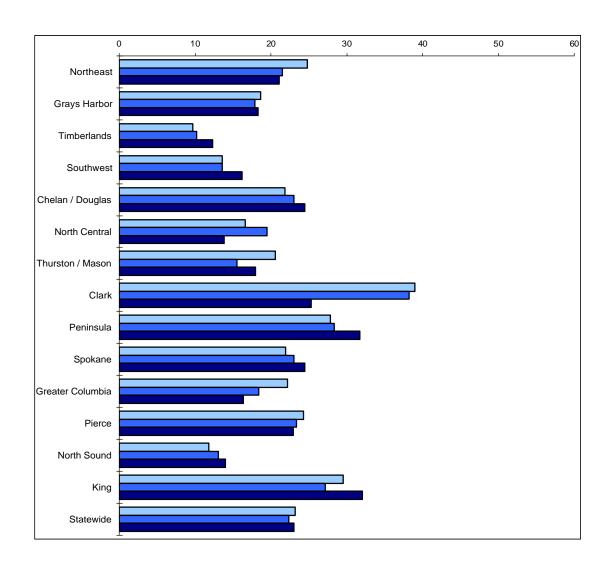
Number of outpatient hours in a Fiscal Year by RSN

Number of people who received outpatient mental health services in a Fiscal Year by RSN

Discussion: The table shows the total number of consumers in the RSN who received outpatient services and the total number of hours of outpatient services delivered. By dividing the two numbers, the average hours of outpatient services per client is calculated.

- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- ▶ King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- ▶ The State total is unduplicated clients across all RSNs (i.e., each person is only counted once in the State).
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in <u>each</u> RSN in which they received services).
- Data Source is Service Utilization database (data set = su2003).

Outpatient Util	Outpatient Utilization Rates - Hours per Client										
Access IV.A.								Calc.4/20	003 SAS		
		FY00			FY01		FY02				
RSN		Total	Avg.		Total	Avg.		Total	Avg.		
	Served		Hours	Served		Hours	Served		Hours		
Northeast	1,655	40,957	24.7	1,514	32,543	21.5	1,699	35,770	21.1		
Grays Harbor	2,254	41,955	18.6	2,333	41,647	17.9	2,277	41,588	18.3		
Timberlands	2,978	28,832	9.7	3,301	33,695	10.2	3,686	45,543	12.4		
Southwest	2,921	39,629	13.6	3,840	52,151	13.6	4,565	73,855	16.2		
Chelan / Douglas	2,312	50,560	21.9	2,675	61,480	23.0	2,629	64,274	24.4		
North Central	2,731	45,473	16.7	2,745	53,540	19.5	2,766	38,216	13.8		
Thurston / Mason	4,062	83,689	20.6	4,459	69,057	15.5	4,826	86,630	18.0		
Clark	6,320	246,477	39.0	6,839	261,019	38.2	7,017	177,605	25.3		
Peninsula	6,091	169,399	27.8	6,715	190,001	28.3	6,705	212,612	31.7		
Spokane	8,368	183,277	21.9	9,600	220,729	23.0	10,198	249,264	24.4		
Greater Columbia	12,444	276,434	22.2	15,105	277,134	18.3	15,954	261,012	16.4		
Pierce	17,290	420,015	24.3	18,570	433,043	23.3	17,437	400,429	23.0		
North Sound	19,188	227,066	11.8	18,295	238,710	13.0	17,995	251,813	14.0		
King	24,424	720,952	29.5	27,003	732,643	27.1	29,945	959,774	32.1		
Statewide	111,131	2,574,715	23.2	120,717	2,697,393	22.3	126,069	2,898,384	23.0		



ACCESS IV. Outpatient Utilization Rates: General Population by Age

B. Operational Definition: Average number of outpatient service hours per consumer by age group for a Fiscal Year.

Rationale for Use: This indicator provides information on the amount of services received by children, adults, and older adults. Combined with penetration rate, the utilization rate describes the intensity of mental health service delivery. Examining this data by age provides an additional understanding of the difference in the amount of service delivered to children, adults, and older adults.

Operational Measure: This indicator is calculated by dividing the total number of outpatient hours for each age group in a Fiscal Year by the total count of people in each age group receiving outpatient services in a Fiscal Year.

Formulas:

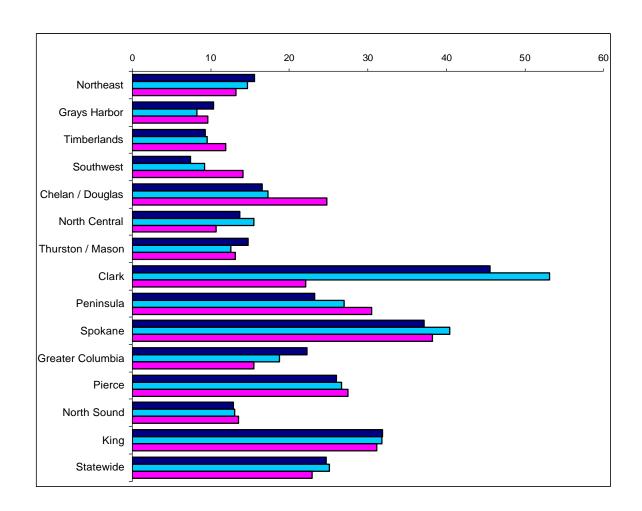
Number of outpatient hours in Fiscal Year by age group {0-17, 18-59, 60+}

Number of people who received mental health services in Fiscal Year by age group {0-17, 18-59, 60+}

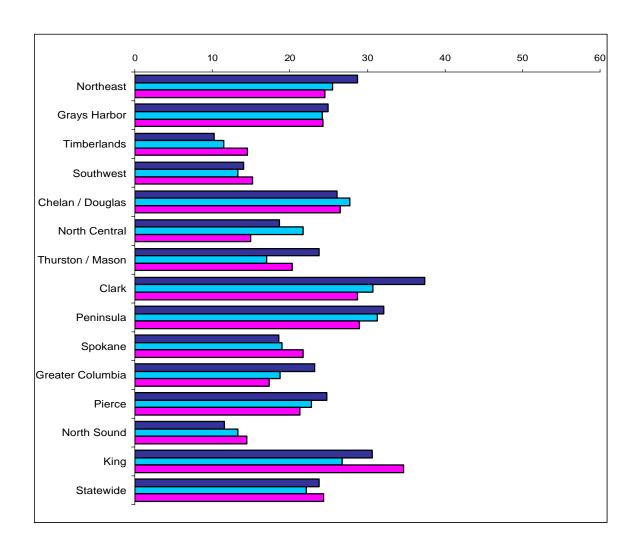
Discussion: The table shows the amount of mental health services received by different age groups. The table shows that the average number of outpatient hours for adults and older adults has increased while the average number of outpatient hours for children decreased. At the same time, the number of youth and adults receiving services has increased.

- ▶ Clark RSN has received additional funding to provide children's services.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- ▶ King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- Age is calculated as of January 1st for each Fiscal Year.
- ▶ The State total is unduplicated clients across all RSNs.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in <u>each</u> RSN in which they received services).
- Data Source is Service Utilization database (data set = su2003).

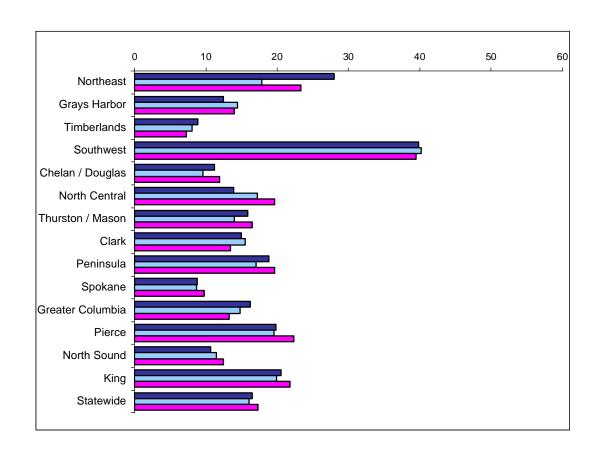
Outpatient Util	Outpatient Utilization Rates: Hours per Client by Age - Youth (0-17 yrs)											
Access IV.B.								Calc. 4/20	03 SAS			
RSN		FY00		FY01_			FY02					
	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours			
Northeast	488	7,604	15.6	454	6,645	14.6	508	6,716	13.2			
Grays Harbor	721	7,475	10.4	715	5,897	8.2	742	7,120	9.6			
Timberlands	903	8,405	9.3	953	9,081	9.5	1,001	11,911	11.9			
Southwest	852	6,291	7.4	1,064	9,748	9.2	1,237	17,481	14.1			
Chelan / Douglas	553	9,161	16.6	711	12,258	17.2	754	18,647	24.7			
North Central	874	11,934	13.7	816	12,642	15.5	880	9,403	10.7			
Thurston / Mason	1,152	16,965	14.7	1,273	15,953	12.5	1,412	18,485	13.1			
Clark	2,506	114,060	45.5	2,593	137,823	53.2	2,652	58,634	22.1			
Peninsula	1,705	39,659	23.3	1,803	48,638	27.0	1,783	54,334	30.5			
Spokane	2,195	81,480	37.1	2,545	102,814	40.4	2,875	109,803	38.2			
Greater Columbia	4,034	89,771	22.3	4,851	90,810	18.7	5,012	77,537	15.5			
Pierce	4,695	121,824	25.9	5,090	135,820	26.7	4,948	135,806	27.4			
North Sound	5,243	67,268	12.8	5,481	71,212	13.0	5,668	76,468	13.5			
King	7,013	223,359	31.8	7,157	227,543	31.8	7,748	241,184	31.1			
Statewide	32,601	805,254	24.7	35,392	886,884	25.1	36,873	843,527	22.9			



Outpatient Utilization Rates: Hours per Client by Age - Adults (18-59 yrs) Access IV. B. Calc. 4/2003 SAS **RSN** FY00 FY01 FY02 Total Avg. Total Avg. Total Avg **Hours Hours** Served **Served Hours** Hours Served Hours 1,076 Northeast 1,036 29,744 913 23,285 25.5 26,385 24.5 28.7 30,609 **Grays Harbor** 1,227 24.9 1,278 30,913 24.2 1,266 30,705 24.3 Timberlands 15,421 1,702 19,432 1,941 28,239 1,509 10.2 11.4 14.5 Southwest 1,900 26,638 14.0 2,564 33,997 13.3 3,086 46,917 15.2 Chelan / Douglas 1,460 38,052 26.1 1,674 46,437 27.7 1,601 42,348 26.5 21.7 North Central 1,645 30,596 18.6 1,712 37,157 1,734 25,822 14.9 Thurston / Mason 62,040 2,615 23.7 2,880 48,827 17.0 3,107 62,974 20.3 Clark 3,358 125,599 37.4 3,780 116,057 30.7 3,944 113,284 28.7 Peninsula 4,058 3,561 114,229 32.1 127,000 31.3 4,854 140,679 29.0 Spokane 4,865 90,308 18.6 5,510 104,513 19.0 5,699 123,615 21.7 Greater Columbia 7,174 166,500 23.2 8,711 163,452 18.8 9,468 163,954 17.3 Pierce 10,746 266,040 24.8 11,648 265,273 22.8 10,988 234,297 21.3 North Sound 12,376 143,427 11.6 11,408 151,449 13.3 10,998 158,713 14.4 King 13,925 425,783 30.6 16,063 429,884 26.8 18,218 632,196 34.7 **Statewide** 65,920 1,564,986 23.7 72,139 1,597,675 22.1 75,313 1,830,128 24.3



Outpatient Util (60+ yrs)	ization F	Rates : I	Hours	per Clie	ent by A	\ge - C	Older Ac	lults	
Access IV.B								Calc. 4/20	003 SAS
RSN		FY00			FY01			FY02	
	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours
Northeast	129	3,607	28.0	146	2,611	17.9	114	2,654	23.3
Grays Harbor	305	3,805	12.5	335	4,830	14.4	269	3,763	14.0
Timberlands	566	5,006	8.8	645	5,181	8.0	747	5,393	7.2
Southwest	165	6,565	39.8	209	8,401	40.2	239	9,429	39.5
Chelan / Douglas	298	3,341	11.2	290	2,785	9.6	275	3,279	11.9
North Central	211	2,941	13.9	217	3,740	17.2	152	2,991	19.7
Thurston / Mason	294	4,669	15.9	305	4,276	14.0	314	5,171	16.5
Clark	450	6,759	15.0	458	7,083	15.5	422	5,681	13.5
Peninsula	824	15,508	18.8	837	14,241	17.0	893	17,541	19.6
Spokane	1,302	11,439	8.8	1,539	13,372	8.7	1,620	15,840	9.8
Greater Columbia	1,235	20,070	16.3	1,541	22,745	14.8	1,472	19,487	13.2
Pierce	1,602	31,751	19.8	1,612	31,495	19.5	1,346	30,066	22.3
North Sound	1,532	16,339	10.7	1,393	15,958	11.5	1,328	16,592	12.5
King	3,482	71,570	20.6	3,779	75,125	19.9	3,965	86,355	21.8
Statewide	12,301	203,371	16.5	13,186	211,844	16.1	12,963	224,242	17.3



ACCESS IV. Outpatient Utilization Rates: General Population by Race/Ethnicity

C. Operational Definition: Average number of outpatient service hours per consumer Statewide by Race/Ethnicity for a Fiscal Year.

Rationale for Use: This indicator provides information on the amount of services received. Combined with penetration rate, the utilization rate describes the intensity of mental health service delivery. Examining this data by Race/Ethnicity provides an additional understanding of the difference in the amount of service delivered to people in different ethnic groups.

Operational Measure: This indicator is calculated by dividing the total number of outpatient hours by the total unduplicated count of people receiving outpatient services for each ethnic group.

Formulas:

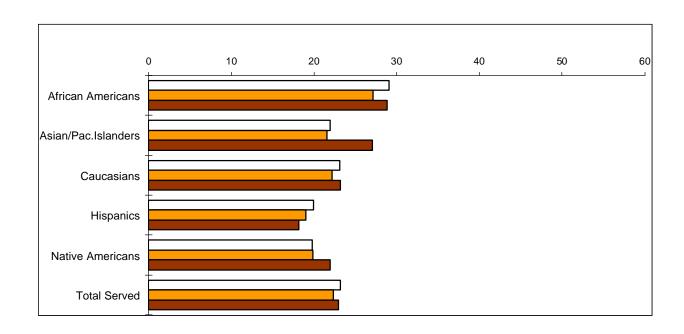
Number of outpatient hours in Fiscal Year by Race/Ethnicity {Asian/Pac.Islander, Afr.American, Caucasian, Hispanic, Nat. American}

Number of outpatient clients in Fiscal Year by Race/Ethnicity {Asian/Pac.Islander, Afr. American, Caucasian, Hispanic, Nat. American}

Discussion: Although people who are Caucasian receive the bulk of services the utilization rates for ethnic minorities are relatively stable across the three Fiscal Years. In Fiscal Year 2002 the amount of services received by Asian/Pacific Islanders increases.

- Race/ethnicity is calculated using the data elements of ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In FY2002 multiracial is included in the other category.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used
- ▶ The State total is unduplicated clients across all RSNs.
- State totals include individuals with ethnicity listed as "other".
- Data source is Service Utilization database (data set = su2003).

Outpatient Utilization Rates: Hours by Race/Ethnicity										
Access IV. C. Calc. 4/2003 SAS										
	<u>FY00</u> <u>FY01</u>							FY02		
Race/ Ethnicity	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours	
African Americans	7,042	204,524	29.0	7,821	212,180	27.1	8,314	239,604	28.8	
Asian/Pac.Islanders	2,840	62,295	21.9	3,071	66,265	21.6	2,956	80,087	27.1	
Caucasians	80,063	1,848,042	23.1	86,383	1,915,876	22.2	87,549	2,030,402	23.2	
Hispanics	6,891	137,496	20.0	8,114	154,566	19.0	9,004	163,283	18.1	
Native Americans	3,152	62,449	19.8	3,891	77,248	19.9	3,992	87,449	21.9	
Total Served	111,131	2,574,715	23.2	120,717	2,697,393	22.3	126,069	2,898,384	23.0	



ACCESS V. Outpatient Utilization Rates: Medicaid Population Served

A. Operational Definition: Average number of outpatient service hours per Medicaid enrollees by RSN for a Fiscal Year.

Rationale for Use: The average number of hours of outpatient services for each Medicaid enrolled consumer provides information on the average amount of services received. Combined with penetration rate, the utilization rate describes the intensity of mental health service delivered to Medicaid enrolled clients.

Operational Measure: This indicator is calculated by dividing the total number of outpatient hours delivered to Medicaid enrollees by the total number of Medicaid enrollees receiving outpatient services in a Fiscal Year.

Formulas:

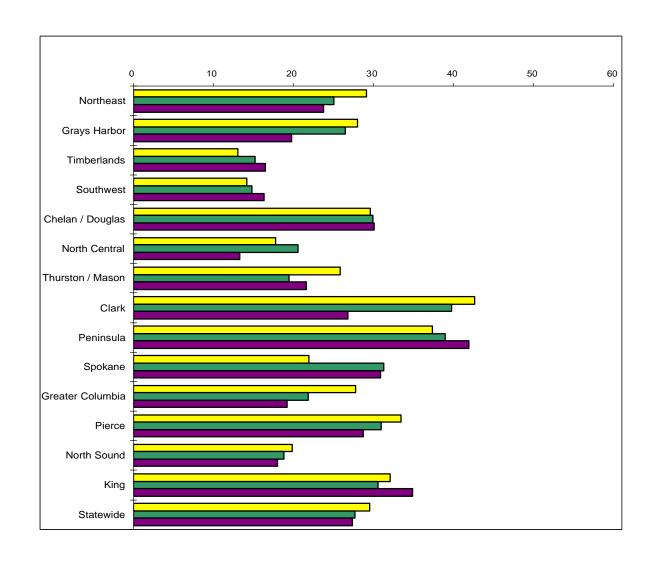
Number of outpatient hours delivered to Medicaid enrollees in Fiscal Year by RSN

Number of Medicaid enrollees who received outpatient services in Fiscal Year by RSN

Discussion: The table shows the total number of Medicaid enrollees in the RSN who received outpatient services and the total number of hours of outpatient services delivered to those people. The table shows a slight decrease statewide in the average number of outpatient service hours received by Medicaid enrollees between Fiscal Year 2000 and Fiscal Year 2001.

- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services, as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- King RSN began reporting crisis services in 2001. Crisis services are not included in Fiscal Year 2000 counts.
- ▶ The State total is unduplicated clients across all RSNs.
- The RSN count shows the number of unduplicated clients within each RSN.
- A client is considered to be in the Medicaid population for the entire Fiscal Year if they received any amount of Medicaid funded service during that Fiscal Year.
- Data source for the number of Medicaid enrollees is the MHD Ad Hoc system.
- Data Source is Service Utilization database (data set = su2003).

Outpatient Utilization Rates: Medicaid Population - Hours per Client											
Access V. A.								Calc. 5/20	003 SAS		
	<u>FY 2000</u>			اِ	FY 2001			FY 2002			
RSN	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours		Total Hours	Avg. Hours		
Northeast	784	22,804	29.1	789	19,782	25.1	1,007	23,914	23.7		
Grays Harbor	995	27,865	28.0	913	24,158	26.5	1,423	28,072	19.7		
Timberlands	1,428	18,648	13.1	1,525	23,173	15.2	1,875	30,908	16.5		
Southwest	1,478	20,895	14.1	2,172	32,109	14.8	2,731	44,651	16.3		
Chelan / Douglas	906	26,832	29.6	964	28,870	29.9	1,289	38,814	30.1		
North Central	1,585	28,187	17.8	1,858	38,217	20.6	2,104	27,974	13.3		
Thurston / Mason	2,828	72,990	25.8	3,089	60,062	19.4	3,364	72,588	21.6		
Clark	3,993	170,032	42.6	4,205	167,224	39.8	4,816	129,156	26.8		
Peninsula	3,739	139,537	37.3	4,005	155,835	38.9	4,194	175,681	41.9		
Spokane	3,250	71,363	22.0	4,377	136,767	31.2	6,054	186,854	30.9		
Greater Columbia	7,885	218,910	27.8	11,450	250,224	21.9	10,660	204,625	19.2		
Pierce	9,215	308,457	33.5	10,593	327,450	30.9	10,324	296,427	28.7		
North Sound	8,017	158,922	19.8	8,917	167,488	18.8	11,183	200,982	18.0		
King	18,954	608,715	32.1	19,912	608,312	30.5	22,669	791,077	34.9		
Statewide	64,223	1,894,157	29.5	73,758	2,039,671	27.7	82,361	2,251,724	27.3		



ACCESS V. Outpatient Utilization Rates: Medicaid by Age

B. Operational Definition: Average number of outpatient service hours per Medicaid enrolled consumer by age group for a Fiscal Year.

Rationale for Use: This indicator provides information on the amount of services received by children, adults, and older adults. Combined with penetration rate, the utilization rate describes the intensity of mental health service delivered to Medicaid enrollees. Examining this data by age provides an additional understanding of the difference in the amount of service delivered to Medicaid enrolled children, adults, and older adults.

Operational Measure: This indicator is calculated by dividing the total number of outpatient hours for each Medicaid enrolled consumer age group by the total unduplicated count of Medicaid enrollees receiving outpatient services in each age group in the Fiscal Year.

Formulas:

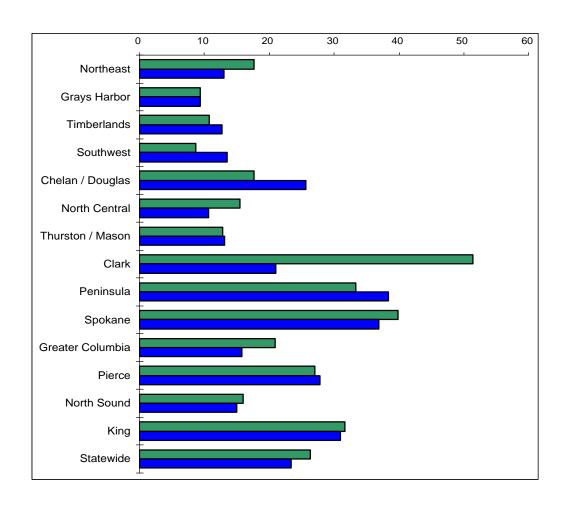
Number of outpatient hours delivered to Medicaid enrollees in a Fiscal Year by age group {0-17, 18-59, 60+}

Number of Medicaid enrollees in a Fiscal Year by age group {0-17, 18-59, 60+}

Discussion: Statewide adult Medicaid enrollees received more hours of outpatient services than youth or older adults. Children are receiving fewer average hours of outpatient services. At the same time the number of Medicaid enrolled youth and adults receiving services has increased.

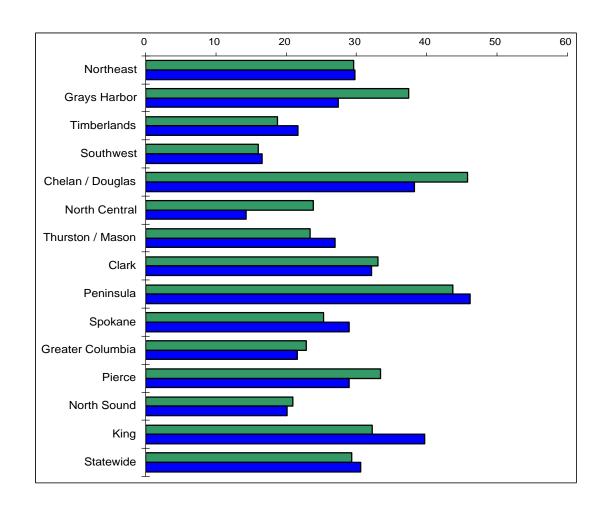
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Age is calculated as of January 1st for each Fiscal Year.
- A client is considered to be in the Medicaid enrolled population for the entire Fiscal Year if they received any amount of Medicaid funded service during that Fiscal Year.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in each RSN in which they received services).
- Data source is Service Utilization database (data set = su2003).
- Data source for counting the number of people in the Medicaid population is the MHD Ad Hoc system. Age breakouts for the Medicaid population are not available prior to Fiscal Year 2001.

Outpatient Utilization Rates: Medicaid Population by Age - Youth (0-17 yrs)									
Access V B.					Calc.	5/2003 SAS			
		FY01			FY02				
RSN	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours			
Northeast	286	5,053	17.7	369	4,796	13.0			
Grays Harbor	342	3,194	9.3	577	5,411	9.4			
Timberlands	666	7,147	10.7	721	9,165	12.7			
Southwest	775	6,750	8.7	922	12,416	13.5			
Chelan / Douglas	398	7,034	17.7	507	13,010	25.7			
North Central	612	9,492	15.5	693	7,363	10.6			
Thurston / Mason	1,133	14,474	12.8	1,239	16,218	13.1			
Clark	1,705	87,648	51.4	1,968	41,237	21.0			
Peninsula	1,178	39,301	33.4	1,162	44,567	38.4			
Spokane	1,825	72,670	39.8	2,234	82,329	36.9			
Greater Columbia	3,847	80,491	20.9	3,779	59,707	15.8			
Pierce	3,399	91,730	27.0	3,388	94,286	27.8			
North Sound	3,610	57,559	15.9	4,266	63,830	15.0			
King	6,165	195,099	31.6	6,500	201,063	30.9			
Statewide	25,698	677,643	26.4	27,984	655,399	23.4			

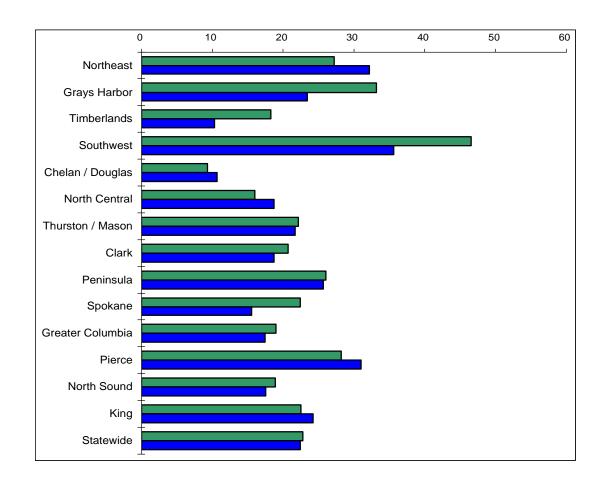


Outpatient Utilization Rates: Medical	d Population by Age - Adults
(18-59 yrs)	

Access V D.				Caic. 5/2003 SAS					
	<u> </u>	FY01			FY02				
RSN		Total	Avg.		Total	Avg.			
	Served	Hours	Hours	Served	Hours	Hours			
Northeast	440	13,025	29.6	575	17,114	29.8			
Grays Harbor	474	17,742	37.4	717	19,637	27.4			
Timberlands	709	13,282	18.7	866	18,782	21.7			
Southwest	1,296	20,827	16.1	1,684	27,897	16.6			
Chelan / Douglas	454	20,792	45.8	634	24,227	38.2			
North Central	1,121	26,721	23.8	1,297	18,485	14.3			
Thurston / Mason	1,778	41,664	23.4	1,943	52,418	27.0			
Clark	2,260	74,693	33.0	2,574	82,870	32.2			
Peninsula	2,433	106,379	43.7	2,613	120,578	46.1			
Spokane	2,367	60,020	25.4	3,354	97,271	29.0			
Greater Columbia	6,621	151,073	22.8	6,038	130,308	21.6			
Pierce	6,312	210,998	33.4	6,140	177,829	29.0			
North Sound	4,684	98,157	21.0	6,132	123,494	20.1			
King	10,646	343,493	32.3	12,806	508,672	39.7			
Statewide	40,886	1,198,863	29.3	46,452	1,419,583	30.6			



Outpatient Utilization Rates: Medicaid Population by Age - Older Adults (60+ yrs)										
Access V B.					Calc	. 5/2003 SAS				
		FY01			FY02					
RSN	Served	Total Hours	Avg. Hours	Served	Total Hours	Avg. Hours				
Northeast	61	1,661	27.2	62	1,995	32.2				
Grays Harbor	97	3,222	33.2	129	3,024	23.4				
Timberlands	150	2,744	18.3	287	2,960	10.3				
Southwest	97	4,519	46.6	121	4,314	35.7				
Chelan / Douglas	112	1,045	9.3	148	1,576	10.6				
North Central	125	2,004	16.0	113	2,114	18.7				
Thurston / Mason	177	3,923	22.2	182	3,952	21.7				
Clark	234	4,840	20.7	269	5,025	18.7				
Peninsula	386	10,049	26.0	407	10,455	25.7				
Spokane	179	4,008	22.4	463	7,220	15.6				
Greater Columbia	977	18,529	19.0	829	14,507	17.5				
Pierce	877	24,701	28.2	780	24,191	31.0				
North Sound	622	11,767	18.9	771	13,557	17.6				
King	3,097	69,628	22.5	3,348	81,200	24.3				
Statewide	7,132	162,639	22.8	7,864	176,091	22.4				



ACCESS VI. Inpatient Utilization Rates: Community Inpatient: General Population

A. Operational Definition: Number of inpatient days spent in Community Hospitals and Evaluation and Treatment Centers by RSN and Statewide per 1000 population for a Fiscal Year.

Rationale for Use: This indicator provides a standard indicator of the amount of inpatient services being utilized. Combined with penetration rate, inpatient utilization provides information on the use of a high cost service – community psychiatric inpatient hospitalization. Community Hospital and Evaluation and Treatment Center (E & T) services are an important component of care for people with acute psychiatric needs.

Operational Measures: The total number of Community Hospital and E&T days in the Fiscal Year divided by the general population, multiplied by 1000.

Formula:

Number of inpatient days (CH, E&T) in the Fiscal Year

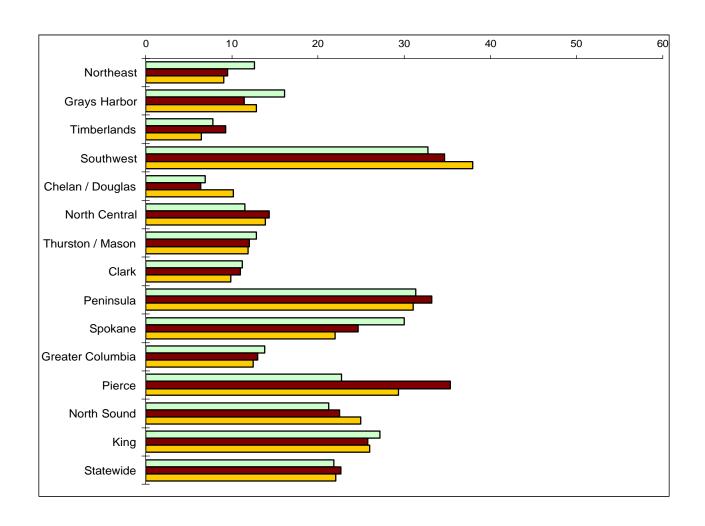
X 1000

Number of people in the general population

Discussion: The inpatient utilization rates show the overall rate of Community Hospital and E&T days for the State of Washington. RSNs have reported of community hospital bed closures in some communities. Bed closures may be associated with decreased utilization rates in some RSNs. However, the rates overall have remained fairly stable.

- ▶ E & T services are only provided by Peninsula, King and North Sound RSN. Data reported are based on RSN report and include the most recent dispute resolutions available at the time of publication.
- Counts are of inpatient days.
- Community hospital data is based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from calculations.
- ▶ Data source is Service Utilization database (data set = su2003)
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.
- Counts are unduplicated across Community Hospitals and E&Ts and include the most recent dispute resolutions available at the time of publication.

Inpatient Utilization Rates: Community Inpatient: Per 1000 General Population											
Access VI.A. Calc.7/2003 SAS											
RSN	<u>FY00</u>			<u> </u>	<u>Y01</u>		<u> </u>	Y02			
KON	Population	# Days	Rate	Population	# Days	Rate	Population	# Days	Rate		
Northeast	69,242	873	12.6	69,600	663	9.5	69,700	634	9.1		
Grays Harbor	67,194	1,081	16.1	68,500	782	11.4	68,400	879	12.9		
Timberlands	93,408	726	7.8	94,300	875	9.3	95,000	610	6.4		
Southwest	92,948	3,041	32.7	93,900	3,254	34.7	94,400	3,580	37.9		
Chelan / Douglas	99,219	683	6.9	99,900	636	6.4	100,700	1,022	10.1		
North Central	130,690	1,503	11.5	132,200	1,892	14.3	132,800	1,842	13.9		
Thurston / Mason	256,760	3,296	12.8	259,800	3,119	12.0	262,100	3,112	11.9		
Clark	345,238	3,878	11.2	352,600	3,883	11.0	363,400	3,591	9.9		
Peninsula	322,447	10,104	31.3	324,300	10,756	33.2	326,200	10,121	31.0		
Spokane	417,939	12,529	30.0	422,400	10,406	24.6	425,600	9,361	22.0		
Greater Columbia	599,730	8,263	13.8	605,600	7,853	13.0	611,100	7,631	12.5		
Pierce	700,820	15,924	22.7	713,400	25,219	35.4	725,000	21,275	29.3		
North Sound	961,452	20,397	21.2	980,100	22,036	22.5	993,000	24,741	24.9		
King	1,737,034	47,247	27.2	1,758,300	45,338	25.8	1,774,300	46,084	26.0		
Statewide	5,894,121	128,523	21.8	5,974,900	135,284	22.6	6,041,700	133,424	22.1		



ACCESS VI. Inpatient Utilization Rates: Community Inpatient by Age

B. Operational Definition: Number of days spent in Community Hospitals and Evaluation and Treatment Centers per 1000 age group for a Fiscal Year.

Rationale for Use: This indicator provides a standard indicator of the amount of inpatient services being utilized. Combined with penetration rate, inpatient utilization provides information on the use of a high cost service – community psychiatric inpatient hospitalization. Community Hospital and Evaluation and Treatment Center (E & T) services are an important component of care for people with acute psychiatric needs. Examining this data by age provides an additional understanding of the differences in acute services delivered to children, adults, and older adults.

Operational Measures: The total number of Community Hospital and E&T days in the Fiscal Year for each age group divided by the general population of each age group multiplied by 1000.

Formula:

Number of inpatient days (CH, E&T) in the Fiscal Year by age group
{0-17, 18-59, 60+}

X 1000

Number of people in general population in the Fiscal Year by age group
{0-17, 18-59, 60+}

Discussion: The tables show the average number of community hospital and E&T inpatient days for children, adults, and older adults. There have been reports of community hospital bed closures in some communities. Bed closures may be associated with a change in utilization rates in some RSNs. Overall, adults have a higher average number of days in Community Inpatient settings than either children or older adults. Children's rates of community inpatient utilization are decreasing,

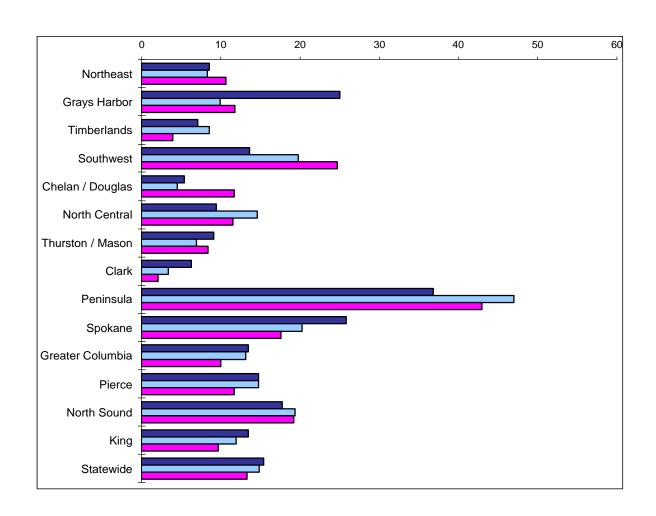
Data Notes:

- ▶ E & T services are only provided by Peninsula, King and North Sound RSN. Data reported are based on RSN report.
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.

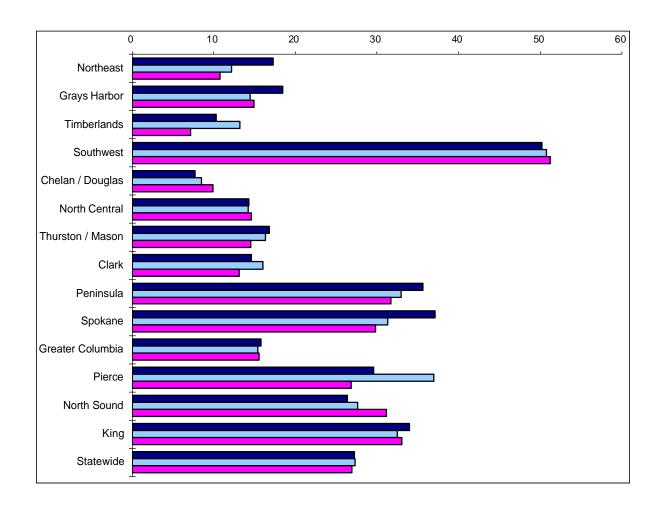
elder rates are increasing slightly, and adult rates remain stable.

- Age is calculated as of January 1st for each Fiscal Year.
- Counts are of inpatient days.
- Community hospital data based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from calculations.
- Data source is Service Utilization database (data set = su2003).
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.
- Counts are unduplicated across Community Hospitals and E&Ts.

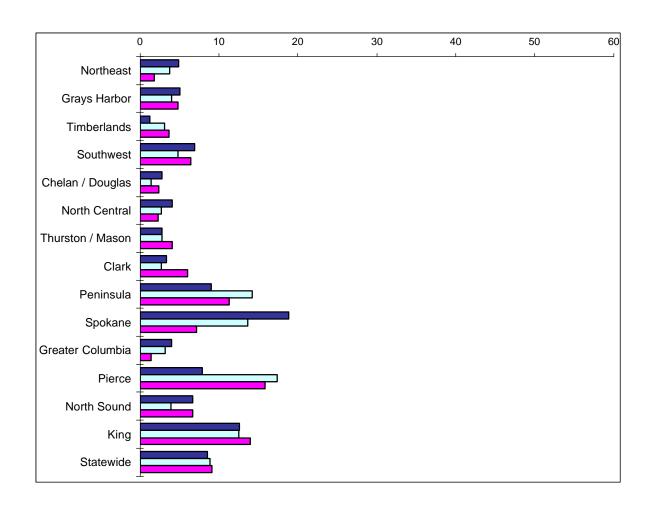
Inpatient Utilization Rates: Community Inpatient -Per 1000 Youth (0-17 yrs)											
Access VI.B. Calc. 3/2003 SAS											
RSN	E	<u>Y00</u>		<u>F</u>	<u>Y01</u>		<u>F</u>	<u>Y02</u>			
	# Youth	# Days	Rate	# Youth	# Days	Rate	# Youth	# Days	Rate		
Northeast	19,106	163	8.5	19,001	157	8.3	18,803	201	10.7		
Grays Harbor	17,251	432	25.0	17,411	172	9.9	17,187	202	11.8		
Timberlands	23,601	168	7.1	23,592	201	8.5	23,493	93	4.0		
Southwest	24,905	339	13.6	24,910	492	19.8	24,764	611	24.7		
Chelan / Douglas	28,238	153	5.4	28,172	126	4.5	28,108	328	11.7		
North Central	40,493	382	9.4	40,619	593	14.6	40,400	466	11.5		
Thurston / Mason	64,146	584	9.1	64,272	448	7.0	64,137	538	8.4		
Clark	98,985	626	6.3	100,216	342	3.4	102,296	212	2.1		
Peninsula	81,372	2,998	36.8	81,024	3810	47.0	80,594	3,463	43.0		
Spokane	107,500	2,776	25.8	107,612	2178	20.2	107,287	1,886	17.6		
Greater Columbia	172,625	2,325	13.5	172,845	2272	13.1	172,618	1,729	10.0		
Pierce	190,569	2,820	14.8	192,323	2832	14.7	193,578	2,268	11.7		
North Sound	254,406	4,521	17.8	257,014	4974	19.4	257,865	4,961	19.2		
King	390,646	5,252	13.4	391,885	4669	11.9	391,515	3,797	9.7		
Statewide	1,513,843	23,346	15.4	1,520,895	22603	14.9	1,522,647	20,249	13.3		



Inpatient Utilization Rates: Community Inpatient - Per 1000 Adults (18-59 yrs)										
Access VI.B.								Calc. 3/2	003 SAS	
RSN	<u>FY00</u>				FY01		<u>FY02</u>			
KON	# Adults	# Days	Rate	# Adults	# Days	Rate	# Adults	# Days	Rate	
Northeast	36,728	633	17.2	37,075	451	12.2	37,236	402	10.8	
Grays Harbor	36,493	673	18.4	37,335	538	14.4	37,376	557	14.9	
Timberlands	48,759	502	10.3	49,417	651	13.2	49,923	359	7.2	
Southwest	51,765	2,598	50.2	52,471	2,663	50.8	52,877	2,708	51.2	
Chelan / Douglas	53,715	414	7.7	54,260	463	8.5	54,821	542	9.9	
North Central	69,238	991	14.3	70,289	996	14.2	70,808	1,035	14.6	
Thurston / Mason	150,573	2,525	16.8	152,849	2,493	16.3	154,543	2,241	14.5	
Clark	201,831	2,941	14.6	206,748	3,313	16.0	213,544	2,798	13.1	
Peninsula	183,899	6,550	35.6	185,600	6,111	32.9	187,135	5,928	31.7	
Spokane	243,787	9,034	37.1	247,105	7,734	31.3	249,470	7,436	29.8	
Greater Columbia	337,983	5,328	15.8	342,324	5,274	15.4	346,379	5,388	15.6	
Pierce	414,860	12,279	29.6	423,440	15,643	36.9	431,136	11,580	26.9	
North Sound	570,893	15,054	26.4	583,669	16,116	27.6	592,519	18,438	31.1	
King	1,106,531	37,584	34.0	1,122,212	36,433	32.5	1,133,727	37,469	33.0	
Statewide	3,507,055	95,358	27.2	3,564,795	97,252	27.3	3,611,493	97,098	26.9	



Inpatient Utilization Rates : Community Inpatient- Per 1000 Older Adults (60 + yrs)										
Access VI.B.								Calc. 3/200	3 SAS	
	FY00_			FY01			FY02			
RSN	# Older Adults	# Days	Rate	# Older Adults	#Days	Rate	# Older Adults	#Days	Rate	
Northeast	13,408	66	4.9	13,524	51	3.8	13,660	25	1.8	
Grays Harbor	13,450	68	5.1	13,754	55	4.0	13,837	66	4.8	
Timberlands	21,048	26	1.2	21,291	66	3.1	21,585	79	3.7	
Southwest	16,278	113	6.9	16,519	80	4.8	16,759	107	6.4	
Chelan / Douglas	17,266	48	2.8	17,468	25	1.4	17,770	42	2.4	
North Central	20,959	86	4.1	21,292	57	2.7	21,592	50	2.3	
Thurston / Mason	42,041	117	2.8	42,679	119	2.8	43,420	178	4.1	
Clark	44,422	150	3.4	45,637	123	2.7	47,560	285	6.0	
Peninsula	57,176	517	9.0	57,676	817	14.2	58,471	660	11.3	
Spokane	66,652	1,255	18.8	67,683	923	13.6	68,843	494	7.2	
Greater Columbia	89,122	356	4.0	90,430	288	3.2	92,103	126	1.4	
Pierce	95,391	750	7.9	97,637	1,696	17.4	100,286	1,589	15.8	
North Sound	136,153	913	6.7	139,418	550	3.9	142,615	955	6.7	
King	239,857	3,017	12.6	244,203	3,054	12.5	249,058	3,480	14.0	
Statewide	873,223	7,479	8.6	889,210	7,903	8.9	907,560	8,266	9.1	



ACCESS VI. Inpatient Utilization Rates: Community Inpatient by Race/Ethnicity

C. Operational Definition: Number of days spent in Community Hospitals and Evaluation and Treatment Centers per 1000 ethnic minority for a Fiscal Year.

Rationale for Use: This indicator provides a standard rate of the amount of inpatient services being utilized. Combined with penetration rate, inpatient utilization provides information on the use of a high cost service – community psychiatric inpatient hospitalization. Community Hospital and Evaluation and Treatment Center (E & T) services are an important component of care for people with acute psychiatric needs. Examining this data by Race/Ethnicity provides an additional understanding of the differences in acute services delivered to different ethnic minority groups.

Operational Measures: The total number of Community Hospital and E & T days in the Fiscal Year for each ethnic minority divided by the general population of each ethnic minority multiplied by 1000.

Formula:

Number of inpatient days (CH, E&T) in the Fiscal Year by Race/Ethnicity {Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

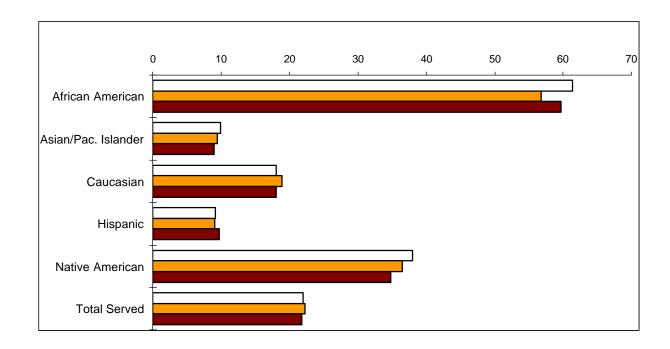
X 1000

Number of people in general population for each ethnic minority {Asian/Pac. Islander, Afr.American, Caucasian, Hispanic, Nat.American}

Discussion: The table shows that African Americans and Native Americans have a higher average number of Community Inpatient days than other ethnic minority groups. These rates are relatively stable across the three years. However, the same population numbers have been used across the 3 years. Therefore, the reported utilization rates may be slightly higher in Fiscal Year 2001 and 2002 than would be reflected with updated census numbers.

- Race/ethnicity is calculated using the data elements of ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In CY2002 multiracial is included in the other category.
- State totals include individuals with ethnicity listed as "other".
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Because Fiscal Year 2001 and Fiscal Year 2002 OFM estimates for ethnicity breakouts were not available at the time of this report, Fiscal Year 2000 census numbers are used.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used.
- Counts are of inpatient days.
- Community hospital data is based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from calculations.
- Data source is Service Utilization database (data set = su2003).

Inpatient Utilization Rates: Community Inpatient- Per 1000 Race/Ethnicity											
Access VI. C. Calc.3/2003 SAS											
Race/Ethnicity	<u>FY00</u>			<u>FY01</u>			<u>FY02</u>				
	Population	# Days	Rate	Population	# Days	Rate	Population	# Days	Rate		
African American	184,631	11,329	61.4	184,631	10,488	56.8	184,631	11,023	59.7		
Asian/Pac. Islander	342,180	3,391	9.9	342,180	3,212	9.4	342,180	3,066	9.0		
Caucasian	4,652,490	83,765	18.0	4,652,490	87,753	18.9	4,652,490	84,010	18.1		
Hispanic	441,509	4,017	9.1	441,509	3,972	9.0	441,509	4,268	9.7		
Native American	85,396	3,244	38.0	85,396	3,114	36.5	85,396	2,971	34.8		
Total Served	5,894,121	129,605	22.0	5,894,121	131,033	22.2	5,894,121	128,188	21.7		



ACCESS VI. Inpatient Utilization Rates: State Hospital by Age

D. Operational Definition: Number of days spent in Children's Long-term Inpatient (CLIP) facilities and State Hospitals per 1000 age group for a Fiscal Year.

Rationale for Use: The rate of inpatient days per 1000 people provides a standard indicator of the amount of inpatient services being utilized. Combined with penetration rate, inpatient utilization provides information on the use of a high cost service – long-term psychiatric inpatient hospitalization. Examining this data by age provides an additional understanding of the differences in long-term hospitalization services delivered to different age groups.

Operational Measures: The total number of State Hospital and CLIP facility days in the Fiscal Year Statewide divided by the general population of each age group, multiplied by 1000.

Formula:

Number of inpatient days (SH, CLIP) in the Fiscal Year {0-17, 18-59, 60+}

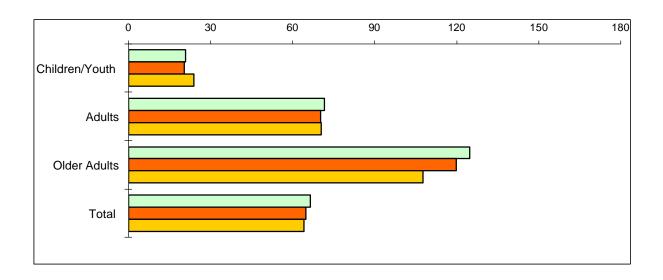
X 1000

Number of people in the general population in the Fiscal Year by age group {0-17, 18-59, 60+}

Discussion: The number of state hospital days remains stable across the three Fiscal Years for all three groups. Older Adults show the most state hospital days compared to children and adults, even though the rate for older adults has decreased over the three years.

- Age is calculated as of January 1st for each Fiscal Year.
- Counts are of inpatient days.
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Fiscal Year 2001 and Fiscal Year 2002 are based on Washington State's Office of Financial Management (OFM) estimates from the 2000 Census.
- CLIP facilities do not serve children under the age of 5.
- CLIP facilities include: Child Study & Treatment Center, Martin Center, McGraw Center, Pearl Street Center and Tamarack Center.
- Data source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS).

Inpatient Utilization Rates: State Hospitals/CLIP Facilities by Age Group per 1000 Access VI. D. Calc. 3/2003 SAS **FY00** FY01 FY02 Age Group Population Population # Days Rate # Days Rate Population # Days Rate Children/Youth 1,513,843 31,669 20.9 1,520,895 31,035 20.4 1,522,647 36,364 23.9 Adults 3,507,055 251,595 71.7 3,564,795 250,844 70.4 3,611,493 254,333 70.4 Older Adults 873,223 108,945 124.8 889,210 106,554 119.8 907,560 97,651 107.6 **Total** 5,894,121 392,209 66.5 5,974,900 6,041,700 388,487 64.3 388,433 65.0



ACCESS VI. Inpatient Utilization Rates: State Hospital by Race/Ethnicity

E. Operational Definition: Number of Days Spent in State Hospitals and Children's Long-term Inpatient (CLIP) facilities per 1000 Ethnic Minority.

Rationale for Use: The rate of inpatient days per 1000 people provides a standard indicator of the amount of inpatient services being utilized. Combined with penetration rate, inpatient utilization provides information on the use of a high cost service —long-term psychiatric inpatient hospitalization. Examining this data by Race/Ethnicity provides an additional understanding of the differences in long-term hospitalization services delivered to different ethnic minority groups.

Operational Measures: The number of State hospital and CLIP days in the Fiscal Year for each Race/Ethnicity group divided by the total population of each Race/Ethnicity group, multiplied by 1000.

Formula:

Number of inpatient days (SH, CLIP) in the Fiscal Year

{Asian/Pac. Islander, Afr. American, Caucasian, Hispanic, Nat. American}

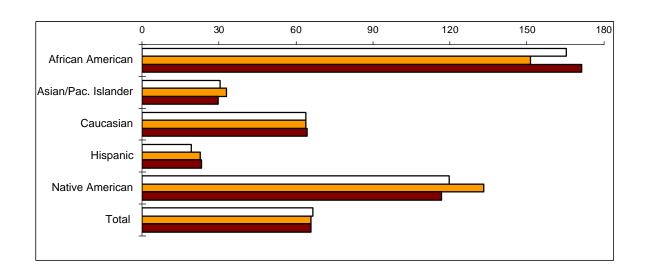
X 1000

Number of people in general population for each ethnic minority in the Fiscal Year {Asian/Pac. Islander, Afr. American, Caucasian, Hispanic, Nat. American}

Discussion: The table shows that African Americans and Native Americans have the most days in State Hospitals and CLIP facilities. However, using the same population numbers have been used across the 3 years. Therefore, the utilization rates may be slightly higher in Fiscal Year 2001 and 2002 than would be reflected with updated census numbers.

- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Because Fiscal Year 2001 and Fiscal Year 2002 OFM estimates for ethnicity breakouts were not available at the time of this report, Fiscal Year 2000 census numbers are used.
- Race/ethnicity is calculated using the data elements of ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In 2002 multiracial is included in the other category.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used
- Counts are inpatient days.
- ▶ Data source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS).
- CLIP facilities do not serve children under the age of 5.
- CLIP facilities include: Child Study & Treatment Center, Martin Center, McGraw Center, Pearl Street Center and Tamarack Center.

Inpatient Utilization Rates:State Hospitals by Race/Ethnicity per 1000										
Access VI. E. Calc. 3/2003 SAS										
Race/Ethnicity	<u> </u>	Y00		<u>FY01</u>			<u>FY02</u>			
Ť	Population	# Days	Rate	Population	# Days	Rate	Population	# Days	Rate	
African American	184,631	30,541	165.4	184,631	27,929	151.3	184,631	31,631	171.3	
Asian/Pac. Islander	342,180	10,395	30.4	342,180	11,275	33.0	342,180	10,130	29.6	
Caucasian	4,652,490	296,753	63.8	4,652,490	297,158	63.9	4,652,490	299,581	64.4	
Hispanic	441,509	8,493	19.2	441,509	10,027	22.7	441,509	10,264	23.2	
Native American	85,396	10,227	119.8	85,396	11,363	133.1	85,396	9,963	116.7	
Total	5,894,121	392,209	66.5	5,894,121	388,433	65.9	5,894,121	388,487	65.9	



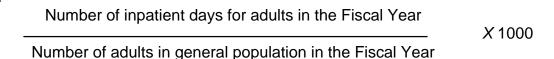
ACCESS VI. Inpatient Utilization Rates: State Hospital by RSN

F. Operational Definition: Number of Days Adults Spent in State Hospitals per 1000 Population by RSN.

Rationale for Use: This indicator provides a standard rate of the amount of inpatient services being utilized. Combined with penetration rate, inpatient utilization provides information on the use of a high cost service, long-term psychiatric inpatient hospitalization.

Operational Measures: The number of State hospital days for adults (18 years or older) in the Fiscal Year for each RSN divided by the total population of adults (18 years or older) in each RSN, multiplied by 1000.

Formula:

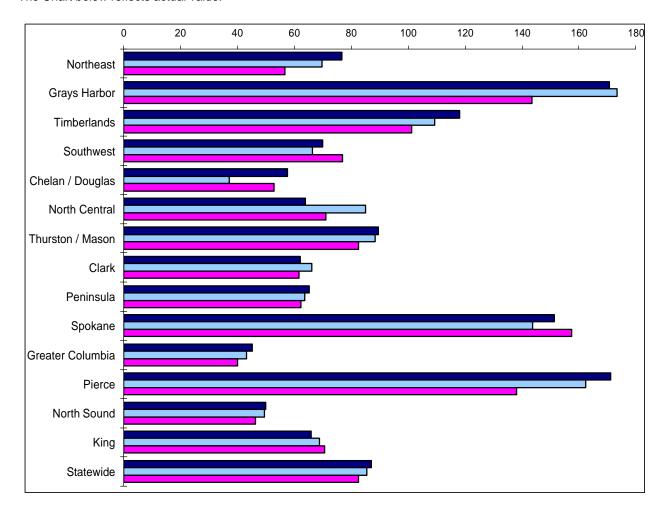


Discussion: This indicator shows the number of State Hospital days for each RSN. Overall, utilization of the state hospitals has decreased. Eastern State Hospital eliminated 28 beds in 2002 and Western State Hospital and the PALS program eliminated 150 beds in 2001 and 2002, for a total reduction in state hospital beds of approximately 178 beds over a two year period (ECS Project Overview, 3/26/03). These bed reductions may impact the penetration rate.

- State hospitals include Eastern and Western State hospitals.
- Census numbers for Fiscal Year 2000 are based on the 2000 Census. Counts are inpatient days.
- Data source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS).

Inpatient Utilization Rates: State Hospital - Per 1000 Adults (18 yrs or older) Access VI.F. Calc. 5/2003 SAS **FY00** FY01 FY02 **RSN** # Days # Adults Rate # Adults # Days Rate # Adults # Days Rate Northeast 50,136 3,844 76.7 50,599 3,533 69.8 50,897 2,887 56.7 **Grays Harbor** 49,943 8,521 170.6 51,089 8,855 173.3 51,213 7,349 143.5 Timberlands 7,733 109.4 7,242 101.3 69,807 8,239 118.0 70,708 71,507 Southwest 4,574 5,360 77.0 68,043 4,767 70.1 68,990 66.3 69,636 Chelan / Douglas 70,981 4,092 57.6 71,728 2,661 37.1 72,592 3,834 52.8 North Central 90,197 5,768 91,581 7,785 85.0 92,400 6,566 71.1 63.9 Thurston / Mason 192,614 17,261 89.6 195,528 17,298 88.5 197,963 16,342 82.6 Clark 246,253 15,274 62.0 252,384 16,714 66.2 261,104 16,113 61.7 Peninsula 241,075 15,697 65.1 243,276 15,491 63.7 245,606 15,281 62.2 Spokane 310,439 47,012 314,788 45,218 143.6 318,313 50,129 151.4 157.5 Greater Columbia 427,105 19,335 45.3 432,755 18,742 43.3 438,482 17,594 40.1 138.1 Pierce 510,251 87,283 171.1 521,077 84,560 162.3 531,422 73,371 North Sound 707,046 35,369 50.0 723,086 35,853 49.6 735,135 34,139 46.4 70.7 King 1,346,388 88,572 65.8 1,366,415 94,095 68.9 1,382,785 97,717 **Statewide** 4,380,278 381,035 87.0 4,454,005 380,914 85.5 4,519,053 373,013 82.5

The Rates above are rounded to the nearest decimal.



ACCESS VII. Youth and Parent/Caregiver's Perception of Access by RSN

A. Operational Definition: Percentage of youth and parents/caregivers agreeing or strongly agreeing with the items on the MHSIP Youth/Family Survey-Access Scale by RSN.

Rationale for Use: Timely and convenient access to services is a major value held by the public mental health system and is a major factor in ensuring that intervention occurs as soon as possible to prevent further deterioration in a person's health and well-being.

Operational Measures: The percentage of <u>youth or parents/caregivers</u> with an average score greater than 3.5 (agree/strongly agree) on items 21 and 22 on the MHSIP

- ◆ Two items are used to construct the Access to Services Scale:
 - ♦ (21) the location of services was convenient for (me)us
 - ♦ (22) services were available at times that were good for (me) us.

Formula:

Take the average of items 21 and 22.

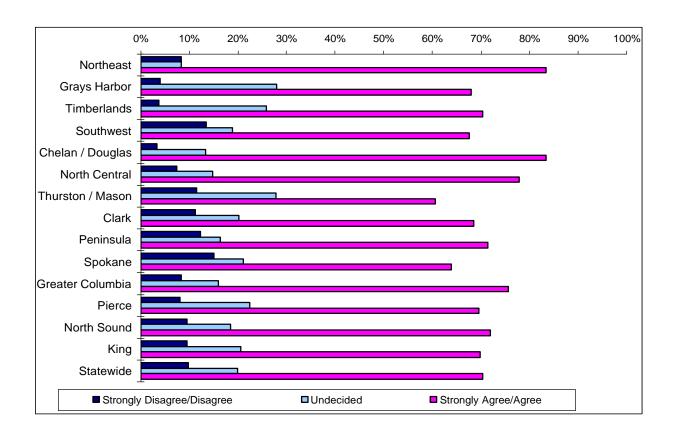
Number of respondents with an average score within respective ranges on items 21 and 22 by RSN

Number of respondents to the survey by RSN

Discussion: This indicator shows the percentage of youth and parents/caregivers of youth who agree or strongly agree (mean score above 3.5) that services are accessible by RSN. The overall agreement rate was 70.3%. Agreement rates varied by RSN from a low of 63.9% items to a high of 83.3% agreeing. These results are similar to statewide results found in the 2001 survey.

- Data Source is MHSIP Youth and Family Survey.
- The Youth and Family MHSIP Survey is a confidential, self-reported measure collected every other year.
- Youth 13 years of age or older fill out the Youth Survey. For child/youth less than 13 years of age their parent/caregiver completes the Family Survey.
- Trained telephone interviewers conducted the survey using a CATI system.
- The response rate for the survey was 44%.
- Copy of the report <u>Toolkit for Children's Survey 2002</u> prepared by The Washington Institute for Mental Illness and Training Western Branch are available from: Judy Hall, Ph.D., Mental Health Division or on The Washington Institute's Webpage http://depts.washington.edu/wimirt/Publications.htm

Youth and Parent/Caregiver's Perception of Access by RSN											
FY2003 - Only											
Access VII.A. Calc. 03/2003 SPSS											
	Youth and Parent/Caregivers Perception										
RSN		Disagree/ Total with	Strongly Disagree/Disagree Total with		ecided	Strongly Agree/Agree Total with					
	Total	Score	%	Score	%						
Northeast	12	1	8.3%	1	8.3%	10	83.3%				
Grays Harbor	25	1	4.0%	7	28.0%	17	68.0%				
Timberlands	27	1	3.7%	7	25.9%	19	70.4%				
Southwest	37	5	13.5%	7	18.9%	25	67.6%				
Chelan / Douglas	30	1	3.3%	4	13.3%	25	83.3%				
North Central	27	2	7.4%	4	14.8%	21	77.8%				
Thurston / Mason	61	7	11.5%	17	27.9%	37	60.7%				
Clark	89	10	11.2%	18	20.2%	61	68.5%				
Peninsula	49	6	12.2%	8	16.3%	35	71.4%				
Spokane	133	20	15.0%	28	21.1%	85	63.9%				
Greater Columbia	156	13	8.3%	25	16.0%	118	75.6%				
Pierce	161	13	8.1%	36	22.4%	112	69.6%				
North Sound	232	22	9.5%	43	18.5%	167	72.0%				
King	272	26	9.6%	56	20.6%	190	69.9%				
Statewide	1,311	128	9.8%	261	19.91%	922	70.3%				



ACCESS VIII. Adults' Perception of Access by RSN

A. Operational Definition: Percentage of adults agreeing or strongly agreeing with the items on the MHSIP Consumer Survey-Access Scale by RSN.

Rationale for Use: Timely and convenient access to services is a major value held by the public mental health system and is a major factor in ensuring that intervention occurs as soon as possible to prevent further deterioration in a person's health and well-being.

Operational Measures: The percentage of <u>adults</u> (18 years or above) with an average score greater than 3.5 (agree/strongly agree) on items 4, 5, 6, 7, 8, and 9 on the MHSIP Adult Consumer survey by RSN.

- Six items are used to construct the Access to Services Scale:
 - ♦ (4) The location of services was convenient.
 - ♦ (5) Staff were willing to see me as often as I felt necessary.
 - ♦ (6)Staff returned my calls within 24 hours.
 - ♦ (7) Services were available at times that were good for me.
 - ♦ (8) I was able to get all the services I thought I needed.
 - ♦ (9) I was able to see a psychiatrist when I wanted to.

Formula:

Take the average of items 4, 5, 6, 7, 8, and 9.

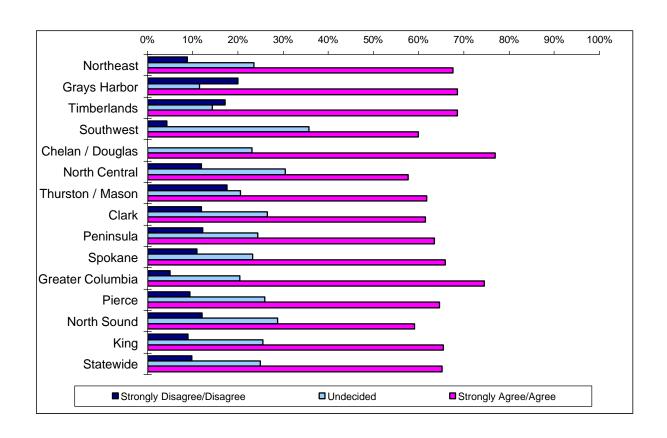
Number of adults with an average score within respective ranges on items 4, 5, 6, 7, 8, and 9 by RSN

Number of respondents to the survey by RSN

Discussion: This indicator shows the percentage of adults who agree or strongly agree that services are accessible by RSN. The overall agreement rate was 65.2% varied by RSN from a low of 57.6 to a high of 76.9% agreeing.

- Data Source is MHSIP Consumer Survey.
- The MHSIP Consumer Survey is a confidential, self-reported measure collected every other year. The survey was collected in the Spring of 2002.
- Adults 18 years or older complete the MHSIP Consumer Survey.
- Trained telephone interviewers conducted the survey using the CATI system.
- ▶ The response rate for the survey was 33%.
- A copy of report <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> prepared by The Washington Institute for Mental Illness Research and Training Western Branch is available from: Judy Hall, Ph.D., Mental Health Division or on the Washington Institute's Webpage http://depts.washington.edu/wimirt/Publications.htm.
- The items used to construct the scale for this indicator is based on the most recent MHSIP survey workgroup recommendations. The scale differs from the scale used in the <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> report that used previously recommended items.

Adult Consumers' Perception of Access by RSN										
	FY2002 - Only									
Access VIII.A. Calc. 04/2003 SPSS										
	Adults' Perception									
RSN		Strongly Disagree/Disagree		Unde	cided	Strongly Ag	ree/Agree			
		Total with	0.4	Total with		Total with	۰,			
	Total	Score	%	Score		Score	%			
Northeast	34	3	8.8%	8	23.5%	23	67.6%			
Grays Harbor	35	7	20.0%	4	11.4%		68.6%			
Timberlands	35	6	17.1%	5	14.3%	24	68.6%			
Southwest	70	3	4.3%	25	35.7%	42	60.0%			
Chelan / Douglas	13	0	0.0%	3	23.1%		76.9%			
North Central	59	7	11.9%	18	30.5%	34	57.6%			
Thurston / Mason	68	12	17.6%	14	20.6%	42	61.8%			
Clark	117	14	12.0%	31	26.5%	72	61.5%			
Peninsula	115	14	12.2%	28	24.3%	73	63.5%			
Spokane	155	17	11.0%	36	23.2%	102	65.8%			
Greater Columbia	298	15	5.0%	61	20.5%	222	74.5%			
Pierce	266	25	9.4%	69	25.9%	172	64.7%			
North Sound	264	32	12.1%	76	28.8%	156	59.1%			
King	501	45	9.0%	128	25.5%	328	65.5%			
Statewide	2,030	200	9.9%	506	24.9%	1,324	65.2%			



Quality & Appropriateness of Services

QUALITY I. Youth and Parents/Caregivers Perception of Quality and Appropriateness by RSN

A. Operational Definition: Percentage of youth and parents/caregivers agreeing or strongly agreeing with the items on the MHSIP Youth/Family Survey - Quality and Appropriateness Scale by RSN.

Rationale for Use: Research suggests that a positive therapeutic relationship between mental health consumers and mental health service providers results in more positive outcomes. Sensitivity to and respect for the consumer; collaboration between the consumer and the mental health provider, consumers' perceptions of competent staff, and good quality of care contribute to a consumer's willingness to remain in treatment.

Operational Measures: The percentage of <u>youth and parents/caregivers</u> with an average score greater than 3.5 (agree/strongly agree) on items 27, 29, 30, & 31 on the MHSIP Youth or Family Survey by RSN.

- Four items are used in the Quality and Appropriateness of Services Scale :
 - ♦ (27) Staff treated me with respect;
 - ♦ (29) Staff respected my family's religious/spiritual beliefs;
 - ♦ (30) Staff spoke with me in a way that I understood;
 - ♦ (31) Staff were sensitive to my cultural/ethnic background.

Formula:

Take the average of items 27, 29, 30, 31

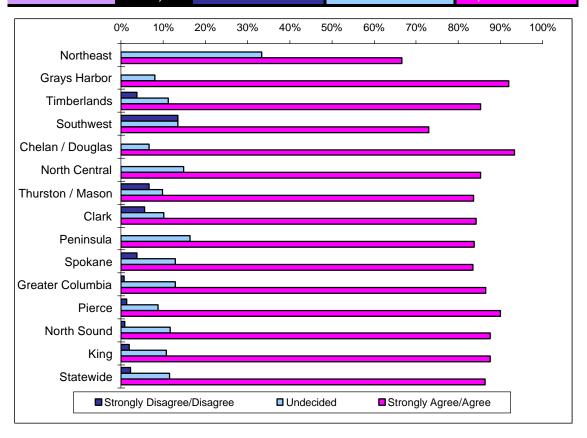
Number of respondents with an average score within respective ranges on item 27, 29, 30, 31 by RSN

Number of respondents to the survey by RSN

Discussion: This indicator shows youth and parent/caregiver perceptions of the quality and appropriateness of services. The overall agreement rate was 86.3%. Agreement rates varied by RSN from a low of 73% to a high of 93.3%. These results are similar to statewide results found in the Fiscal Year 2001 survey.

- Data Source is MHSIP Youth or Family Survey.
- ▶ The MHSIP Youth or Family Survey is a confidential, self-reported measure collected every other year. The first time the survey was collected was in Fiscal Year 2000 and the second time was in Fiscal Year 2002.
- ▶ Youth 13 through 21 years of age fill out the Youth Survey. For child/youth less than 13 years of age their parent/caregiver completes the Family Survey.
- Trained consumer telephone interviewers conducted the survey using a CATI system.
- The response rate for the survey was 44%.
- Copy of the report <u>Toolkit for Children's Survey 2002</u> prepared by The Washington Institute for Mental Illness Research and Training Western Branch are available from: Judy Hall, Ph.D., Mental Health Division or on The Washington Institute's Webpage http://depts.washington.edu/wimirt/Publications.htm.
- The scales used to construct the scale for this indicator is based on the most recent MHSIP survey workgroup recommendations. The scale differs from the scale used in the <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> report, which used previously recommended items.

Youth and Parent/Caregiver's Perception of Quality & Appropriateness of Treatment									
FY 2003-ONLY									
Quality I.A. Calc. 03/2003 SPSS									
a sidility iii ii	Youth and Parent/Caregiver Perception								
RSN		St	rongly ee/Disagree		decided	Strongly Agree/Agree			
	Total	Total with Score	%	Total with Score		Total with Score	%		
Northeast	12	0	0.0%	4	33.3%	8	66.7%		
Grays Harbor	25	0	0.0%	2	8.0%	23	92.0%		
Timberlands	27	1	3.7%	3	11.1%	23	85.2%		
Southwest	37	5	13.5%	5	13.5%	27	73.0%		
Chelan / Douglas	30	0	0.0%	2	6.7%	28	93.3%		
North Central	27	0	0.0%	4	14.8%	23	85.2%		
Thurston / Mason	61	4	6.6%	6	9.8%	51	83.6%		
Clark	89	5	5.6%	9	10.1%	75	84.3%		
Peninsula	49	0	0.0%	8	16.3%	41	83.7%		
Spokane	133	5	3.8%	17	12.8%	111	83.5%		
Greater Columbia	156	1	0.6%	20	12.8%	135	86.5%		
Pierce	161	2	1.2%	14	8.7%	145	90.1%		
North Sound	232	2	0.9%	27	11.6%	203	87.5%		
King	272	5	1.8%	29	10.7%	238	87.5%		
Statewide	1,311	30	2.3%	150	11.4%	1,131	86.3%		



QUALITY II. Adults' Perception of Quality and Appropriateness by RSN

A. Operational Definition: Percentage of adults (18 years or above) agreeing or strongly agreeing with the items on the MHSIP Adult Consumer Survey - Quality and Appropriateness Scale by RSN.

Rationale for Use: Research suggests that a positive therapeutic relationship between mental health consumers and mental health service providers result in more positive outcomes. Sensitivity to and respect for the consumer, collaboration between the consumer and the mental health provider, consumers' perceptions of competent staff, and good quality of care contribute to a consumer's willingness to remain in treatment.

Operational Measures: The percentage of <u>adults</u> with an average score greater than 3.5 (agree/strongly agree) on items 10, 12, 13, 14, 15, 16, 18, 19, 20 on the Adult Consumer MHSIP Survey by RSN.

- Nine items are used in the Quality and Appropriateness of Services Scale :
 - ♦ (10) Staff there believes I can grow and change and recover.
 - ♦ (12) I feel free to complain.

 - ♦ (15) Staff told me what side effects of my medication to watch out for.
 - (16) Staff respected my wishes about who is and who is not to be given information about my treatment.
 - (18) Staff was sensitive to my cultural background (such as my race, religion, language, etc.)
 - (19) Staff helped me obtain the information I needed so that I could take charge of managing my illness.
 - (20) I was encouraged to use consumer-run programs such as support groups, drop-in centers, crisis phone lines, etc.

Formula:

Take the average of items 10, 12, 13, 14, 15, 16, 18, 19, 20

Number of respondents with an average score within respective ranges on items listed above by RSN

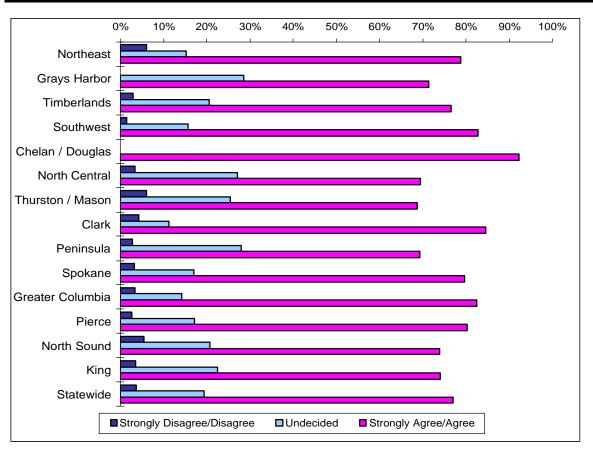
Number of respondents to the survey by RSN

Discussion: This indicator shows adult perceptions of the quality and appropriateness of services by RSN. The overall agreement rate was 77.1%. Agreement rates varied by RSN from a low of 69.4% to a high of 92.3%.

- Data Source is MHSIP Adult Consumer Survey, which is a confidential, self-reported measure collected every other year. The survey was collected in Fiscal Year 2001.
- Adults 18 years or older are interviewed for the Adult Consumer Survey.
- Trained consumer telephone interviewers conducted the survey using the CATI system.
- The response rate for the survey was 33%.
- A copy of report <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> prepared by The Washington Institute for Mental Illness Research and Training Western Branch is available from: Judy Hall, Ph.D., Mental Health Division or from the Washington Institute's website http://depts.washington.edu/wimirt/Publications.htm.
- ▶ The scales used to construct the scale for this indicator is based on the most recent MHSIP survey workgroup recommendations. The scale differs from the scale used in the <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> report, which used previously recommended items.

Adult Consumers' Perception of Quality & Appropriateness of Treatment FY 2002 - ONLY

Quality II.A. Calc. 04/2003 SPSS										
	Adult Consumers' Perception									
RSN		Strongly Disagree/Disagree		Und	ecided	Strongly Agree/Agree				
	Total	Total		Total		Total				
		with	%	with Score	%	with Score	%			
N. d.	20	Score								
Northeast	33	2	6.1%	5	15.2%	26	78.8%			
Grays Harbor	35	0	0.0%	10	28.6%		71.4%			
Timberlands	34	1	2.9%	7	20.6%	26	76.5%			
Southwest	70	1	1.4%	11	15.7%	58	82.9%			
Chelan / Douglas	13	1	0.0%	0	0.0%	12	92.3%			
North Central	59	2	3.4%	16	27.1%	41	69.5%			
Thurston / Mason	67	4	6.0%	17	25.4%	46	68.7%			
Clark	116	5	4.3%	13	11.2%	98	84.5%			
Peninsula	111	3	2.7%	31	27.9%	77	69.4%			
Spokane	153	5	3.3%	26	17.0%	122	79.7%			
Greater Columbia	297	10	3.4%	42	14.1%	245	82.5%			
Pierce	263	7	2.7%	45	17.1%	211	80.2%			
North Sound	261	14	5.4%	54	20.7%	193	73.9%			
King	494	17	3.4%	111	22.5%	366	74.1%			
Statewide	2,006	72	3.6%	388	19.3%	1,546	77.1%			



QUALITY III. Youth and Parents/Caregivers Perception of Participation in Treatment by RSN

A. Operational Definition: Percentage of youth and parents/caregivers agreeing or strongly agreeing with the items on the MHSIP Youth/Family Survey -Participation in Treatment Scale.

Rationale for Use: Research suggests that consumer's involvement in treatment results in better outcomes. It promotes self-determination and empowerment and facilitates partnership between service providers and consumers. Treatment and involvement of family members and consumers is a major value held by the public mental health system.

Operational Measures: The percentage of <u>youth and parents/caregivers</u> with an average score greater than 3.5 (agree/strongly agree) on items 14, 15, and 19 on the MHSIP Youth/Family Survey for a Fiscal Year by RSN.

- Three items are used in the Participation in Treatment Scale:
 - ♦ (14) I helped to choose my (child's) services:
 - ♦ (15) I helped to choose my (child's) treatment goals.
 - ♦ (19) I was actively involved in my (child's) treatment.

Formula:

Take the average of items 14, 15, and 19

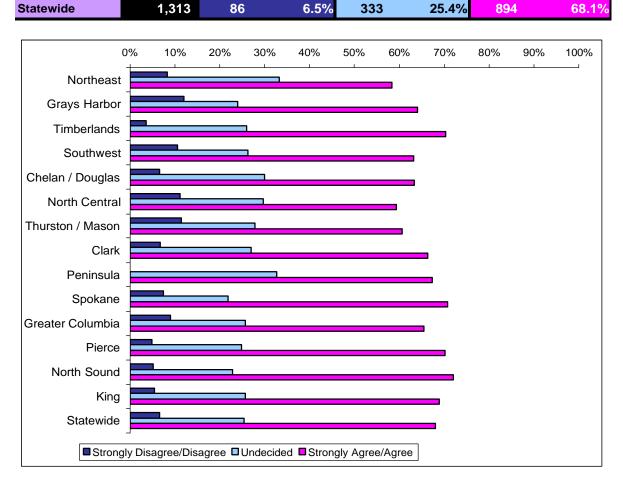
Number of respondents with an average score within respective ranges on items 14, 15, and 19 by RSN

Number of respondents to the survey by RSN

Discussion: This indicator shows youth and parents/caregivers perception of their participation in treatment. The overall agreement rate was 68.1%. Agreement rates varied by RSN from a high of 72% to a low of 58.3%. These results are similar to statewide results found in the Fiscal Year 2001 survey.

- Data Source is MHSIP Youth or Family Survey, which is a confidential, self-reported measure collected every other year. The first time the survey was collected was in Fiscal Year 2001 and the second time was in Fiscal Year 2003.
- Youth 13 through 21 years of age fill out the Youth Survey. For child/youth less than 13 years of age their parent/caregiver completes the Family Survey.
- Trained consumer telephone interviewers conducted the survey using the CATI system.
- The response rate for Fiscal Year 2001 survey was 40% and for the Fiscal Year 2003 survey was 44%.
- A copy of report <u>Children with Special Needs Survey 2001</u> and <u>Toolkit for Children's Survey 2002</u> prepared by The Washington Institute for Mental Illness Research and Training Western Branch is available from: Judy Hall, Ph.D., Mental Health Division or on the Washington Institute's Webpage http://depts.washington.edu/wimirt/Publications.htm

Youth and Parent/Caregiver's Perception of Participation in Treatment FY 2003 - ONLY										
Quality III.A.							lc. 03/2003 SPSS			
	Youth and Family/Caregiver Perception									
RSN			rongly ee/Disagree	Und	lecided		trongly ee/Agree			
	Total	Total with Score	%	Total with Score	%	Total with Score				
Northeast	12	1	8.3%	4	33.3%	7	58.3%			
Grays Harbor	25	3	12.0%	6	24.0%	16	64.0%			
Timberlands	27	1	3.7%	7	25.9%	19	70.4%			
Southwest	38	4	10.5%	10	26.3%	24	63.2%			
Chelan / Douglas	30	2	6.7%	9	30.0%	19	63.3%			
North Central	27	3	11.1%	8	29.6%	16	59.3%			
Thurston / Mason	61	7	11.5%	17	27.9%	37	60.7%			
Clark	89	6	6.7%	24	27.0%	59	66.3%			
Peninsula	49	0	0.0%	16	32.7%	33	67.3%			
Spokane	133	10	7.5%	29	21.8%	94	70.7%			
Greater Columbia	156	14	9.0%	40	25.6%	102	65.4%			
Pierce	161	8	5.0%	40	24.8%	113	70.2%			
North Sound	232	12	5.2%	53	22.8%	167	72.0%			
King	273	15	5.5%	70	25.6%	188	68.9%			



QUALITY IV. Adults' Perception of Participation in Treatment Planning by RSN

A. Operational Definition: Percentage of adult consumers agreeing or strongly agreeing with the items on the MHSIP Adult Consumer Survey -Participation in Treatment Planning Scale by RSN.

Rationale for Use: Research suggests that consumer's involvement in treatment results in better outcomes. It promotes self-determination and empowerment and facilitates partnership between service providers and consumers. Participation and involvement of consumers is a major value held by the public mental health system.

Operational Measures: The percentage of <u>adult consumers</u> with an average score greater than 3.5 (agree/strongly agree) on items 11 and 17 on the MHSIP Adult Consumer Survey for a Fiscal Year by RSN.

- ◆ Two items are used in the Participation in Treatment Scale:
 - (11) I felt comfortable asking questions about my treatment and/or medications
 - (17) I, not staff, decided my treatment goals.

Formula:

Take the average of items 11 and 17

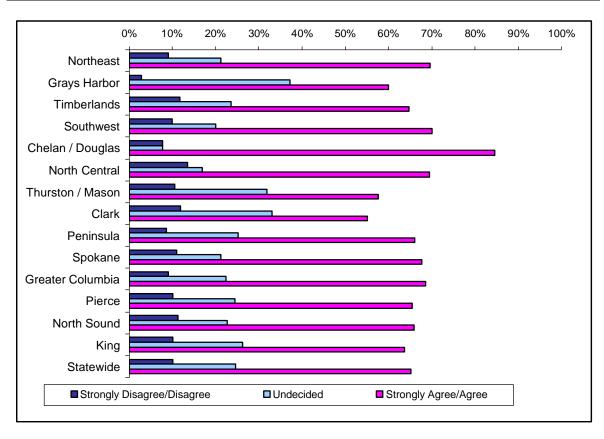
Number of respondents with an average score within respective ranges on items 11 and 17 by RSN

Number of respondents to the survey by RSN

Discussion: This indicator shows the percentage of adult consumers who agree or strongly agree that they participate in planning their own services. The overall agreement rate was 65.2%. Agreement rates varied by RSN from a low of 55.1% to a high of 84.6%. These results are consistent with national survey results, although this indicator shows markedly lower agreement rates than other indicators from the MHSIP Consumer Surveys.

- Data Source is MHSIP Consumer Survey, which is a confidential, self-reported measure collected every other year. The survey was collected in the Spring of 2002.
- Adults 18 years or older are interviewed for the survey.
- ▶ Trained consumer telephone interviewers conducted the survey using a CATI system.
- The response rate for the survey was 33%.
- A copy of report <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> prepared by The Washington Institute for Mental Illness Research and Training Western Branch is available from: Judy Hall, Ph.D., Mental Health Division or on the Washington Institute's Webpage http://depts.washington.edu/wimirt/Publications.htm.

Adult Consumers' Perception of Participation in Treatment FY 2002 - ONLY Quality IV.A. Calc. 04/2003 SPSS									
		St	Adult Con rongly		Perception		rongly		
RSN			ee/Disagree	Und	decided	Agree/Agree			
	Total	Total		Total		Total			
		with Score	%	with Score	%	with Score	%		
Northeast	33	3	9.1%	7	21.2%	23	69.7%		
Grays Harbor	35	1	2.9%	13	37.1%	23	60.0%		
Timberlands	34	4	11.8%	8	23.5%	22	64.7%		
Southwest	70	7	10.0%	14	20.0%	49	70.0%		
Chelan / Douglas	13	1	7.7%	1	7.7%	11	84.6%		
North Central	59	8	13.6%	10	16.9%	41	69.5%		
Thurston / Mason	66	7	10.6%	21	31.8%	38	57.6%		
Clark	118	14	11.9%	39	33.1%	65	55.1%		
Peninsula	115	10	8.7%	29	25.2%	76	66.1%		
Spokane	155	17	11.0%	33	21.3%	105	67.7%		
Greater Columbia	299	27	9.0%	67	22.4%	205	68.6%		
Pierce	266	27	10.2%	65	24.4%	174	65.4%		
North Sound	264	30	11.4%	60	22.7%	174	65.9%		
King	503	51	10.1%	132	26.2%	320	63.6%		
Statewide	2,030	207	10.2%	499	24.6%	1,324	65.2%		



QUALITY V. Children/Youth Treatment Settings Outside of Mental Health Agency.

A. Operational Definition: Percentage of children/youth (0-17 years) who received outpatient mental health services in the home, at school, or outside the mental health provider agency at any time during a Fiscal Year.

Rationale for Use: Providing services outside of the mental health provider agency is a value of the mental health system. It is a measure of outreach that can facilitate access to services, decrease treatment barriers and decrease the stigma associated with the provision of mental health services.

Operational Measures: This is measured by the total number of children/youth (0-17 years) who received services in the home, at school, and outside the mental health agency at any time during a Fiscal Year divided by the total number of children/youth (0-17 years) who received outpatient services in the same Fiscal Year.

Formula:

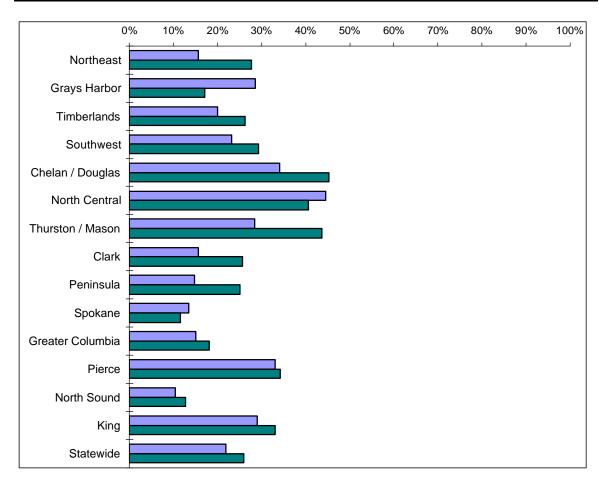
Number of children/youth (0-17 years) who received outpatient services at any time during the Fiscal Year by RSN {at home, school, or outside MH office}

Number of children/youth (0-17 years) who received outpatient services during the Fiscal Year by RSN

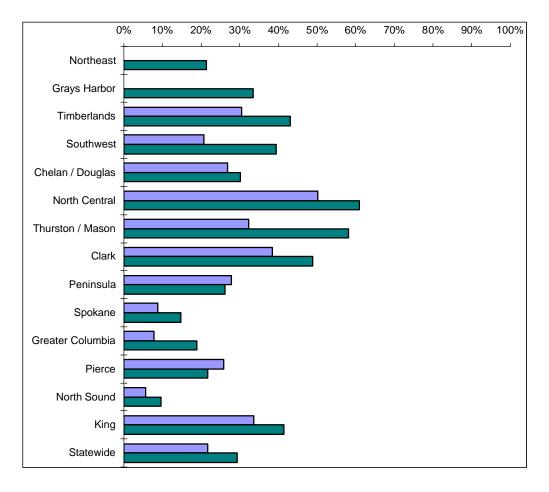
Discussion: This indicator shows the percentage of children/youth who received outpatient services in their home, at school, and in other settings outside of the mental health provider agency. The number of children receiving services in their homes or schools increased over the two years.

- A child/youth could receive services in more than one of these settings in a year. Therefore, the count across categories of service setting is duplicated.
- Age is calculated as of January 1st for each Fiscal Year.
- Prior to January 2002, "Service Location" in the January 2000 Data Dictionary is used. Home = A, school = C, MH Provider = F or G. The following categories define outside mental health provider agency:
 - ♦ Place of consumer's work (B)
 - ♦ General hospital or emergency room (D)
 - ♦ Jail or place of detention by justice system (E)
 - In inpatient mental health facility (including community hospital psych unit) (G)
 - ♦ Other setting in the community (Z)
- After January 1, 2002, "Healthcare Service Location" in the January 2002 Data Dictionary is used. home = 12, school = 19, 80, outside mental health agency: 21, 22, 23, 51, 52, 56, 99, 31-34, 61, 50, 71, 72, 54, 55.
- Multiple service location codes were grouped into <u>outside mental health agency</u> because the number of people served in each individual location is too small to report separately.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in each RSN in which they received services). The statewide total shows the number of unduplicated clients across all RSNs (i.e., a person is only counted even if they received services from more than one RSN in a Fiscal Year).
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Data source is Service Utilization database (data set = outcomes).

Percentage of Youth (0-17 yrs) who Received Services in Their Home								
Quality V.A. Calc. 05/2003 SAS								
RSN	<u> </u>	Y01_			FY02			
	Total # Served	Home	%	Total # Served	Home	%		
Northeast	454	71	15.6%	508	141	27.8%		
Grays Harbor	715	204	28.5%	742	127	17.1%		
Timberlands	953	191	20.0%	1001	263	26.3%		
Southwest	1,064	247	23.2%	1237	363	29.3%		
Chelan / Douglas	711	242	34.0%	754	341	45.2%		
North Central	816	364	44.6%	880	358	40.7%		
Thurston / Mason	1,273	363	28.5%	1412	618	43.8%		
Clark	2,593	406	15.7%	2652	681	25.7%		
Peninsula	1,803	267	14.8%	1783	447	25.1%		
Spokane	2,545	342	13.4%	2875	332	11.5%		
Greater Columbia	4,851	733	15.1%	5012	905	18.1%		
Pierce	5,090	1,684	33.1%	4948	1,698	34.3%		
North Sound	5,481	574	10.5%	5668	719	12.7%		
King	7,157	2,074	29.0%	7748	2,568	33.1%		
Statewide	35,392	7,762	21.9%	36,873	9,561	25.9%		

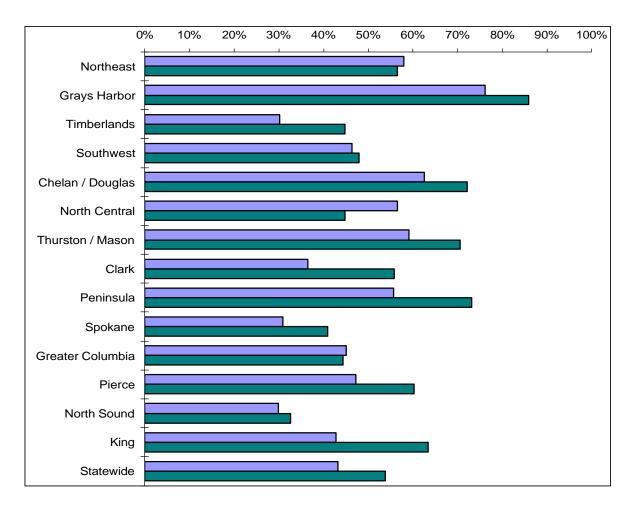


Percentage of Youth (0-17 yrs) who Received Services in Their School										
Quality V.A. Calc. 05/2003 SAS										
		<u>FY01</u>			<u>FY02</u>					
RSN	Total # Served	School	%	Total # Served	School	%				
Northeast	454	0	0.0%	508	109	21.5%				
Grays Harbor	715	0	0.0%	742	248	33.4%				
Timberlands	953	291	30.5%	1,001	432	43.2%				
Southwest	1,064	220	20.7%	1,237	488	39.5%				
Chelan / Douglas	711	191	26.9%	754	227	30.1%				
North Central	816	410	50.2%	880	537	61.0%				
Thurston / Mason	1,273	411	32.3%	1,412	821	58.1%				
Clark	2,593	998	38.5%	2,652	1,294	48.8%				
Peninsula	1,803	503	27.9%	1,783	466	26.1%				
Spokane	2,545	224	8.8%	2,875	425	14.8%				
Greater Columbia	4,851	382	7.9%	5,012	951	19.0%				
Pierce	5,090	1,316	25.9%	4,948	1,078	21.8%				
North Sound	5,481	308	5.6%	5,668	550	9.7%				
King	7,157	2,407	33.6%	7,748	3,212	41.5%				
Statewide	35,392	7,661	21.6%	36,873	10,838	29.4%				



Percentage of Youth (0-17 yrs) who Received Services Outside the Mental Health Provider Agency

Quality V.A. Calc. 05/2003 S								
		<u>FY01</u>		<u>FY02</u>				
RSN	Total # Served	Outside MHP	%	Total # Served	Outside MHP	%		
Northeast	454	263	57.9%	508	287	56.5%		
Grays Harbor	715	545	76.2%	742	637	85.8%		
Timberlands	953	287	30.1%	1001	448	44.8%		
Southwest	1,064	493	46.3%	1237	594	48.0%		
Chelan / Douglas	711	445	62.6%	754	544	72.1%		
North Central	816	461	56.5%	880	394	44.8%		
Thurston / Mason	1,273	752	59.1%	1412	996	70.5%		
Clark	2,593	947	36.5%	2652	1,481	55.8%		
Peninsula	1,803	1,004	55.7%	1783	1,304	73.1%		
Spokane	2,545	785	30.8%	2875	1,178	41.0%		
Greater Columbia	4,851	2,189	45.1%	5012	2,221	44.3%		
Pierce	5,090	2,405	47.2%	4948	2,981	60.2%		
North Sound	5,481	1,639	29.9%	5668	1,851	32.7%		
King	7,157	3,067	42.9%	7748	4,913	63.4%		
Statewide	35,392	15,282	43.2%	36,873	19,829	53.8%		



QUALITY VI. Outpatient Clients who Received DASA and MHD Services

A. Operational Definition: Percentage of mental health outpatient service recipients who received Department of Alcohol and Substance Abuse Services (DASA) in the Fiscal Year by RSN and Statewide.

Rationale for Use: Providing or facilitating access to both mental health and substance abuse treatment is necessary to promote recovery. Examining the number of clients who receive both substance abuse and mental health treatment provides an indication of how well these two service delivery systems are coordinated and the number of clients who have co-occurring mental illness and substance abuse disorders.

Operational Measures: The number of mental health outpatient service recipients who also received DASA services at some point in time in the Fiscal Year divided by the total number of mental health outpatient service recipients in the same Fiscal Year.

Formulas:

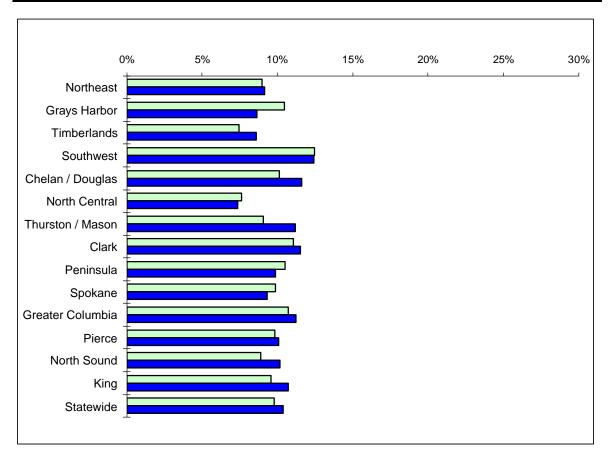
Number of mental health outpatient service recipients who also received DASA services at any time during the Fiscal Year

Number of outpatient mental health service recipients in the Fiscal Year

Discussion: These numbers are likely an underestimate of the true number of service recipients with co-occurring and substance abuse disorders. However, they do reflect the number of clients who receive services from both MHD and DASA in Washington State. Statewide, 10.4% of the clients served by the MHD are also served by DASA.

- ▶ The Research and Data Analysis (RDA) Branch of DSHS compiled this data. The specific data source is the Client Services Database (CSDB). The data was pulled in December, 2002.
- Mental health outpatient service recipients include all clients who received any amount and type of outpatient mental health services. RDA also generated this count.
- DASA services include: Detoxification, ADATSA Assessments, Residential Treatment, Outpatient Treatment, and Opiate Substitution Treatment
- RDA uses a slightly different method of assigning clients to RSNs than the mental health division, which may result in slightly different numbers of outpatient recipients.

Outpatient Clients who Received DASA and MHD Services									
Quality VI.A.			С	alc. 12/2002 RDA					
		<u>FY00</u>			<u>FY01</u>				
RSN	# of MHD Clients Served	# of DASA Clients Served	% of Clients Served by MHD and DASA	# of MHD	# of DASA Clients Served	% of Clients Served by MHD and DASA			
Northeast	1,435	129	9.0%	1,457	133	9.1%			
Grays Harbor	2,170	227	10.5%	2,274	196	8.6%			
Timberlands	2,827	210	7.4%	2,995	257	8.6%			
Southwest	3,226	402	12.5%	4,068	505	12.4%			
Chelan / Douglas	1,935	196	10.1%	2,308	268	11.6%			
North Central	2,124	162	7.6%	2,624	193	7.4%			
Thurston / Mason	3,900	354	9.1%	4,519	506	11.2%			
Clark	5,691	630	11.1%	7,257	838	11.5%			
Peninsula	5,922	623	10.5%	6,580	649	9.9%			
Spokane	8,234	811	9.8%	9,915	922	9.3%			
Greater Columbia	11,647	1,249	10.7%	12,392	1,391	11.2%			
Pierce	16,269	1,601	9.8%	17,801	1,795	10.1%			
North Sound	18,176	1,616	8.9%	17,416	1,768	10.2%			
King	23,097	2,209	9.6%	27,929	2,989	10.7%			
Statewide	106,653	10,419	9.8%	119,535	12,410	10.4%			



QUALITY VI. Outpatient Clients who Received DASA and MHD Services by Age Group

B. Operational Definition: Percentage of mental health outpatient service recipients who received Department of Alcohol and Substance Abuse Services (DASA) in the Fiscal Year by RSN and Statewide by Age Group.

Rationale for Use: Providing and facilitating access to both mental health and substance abuse treatment is necessary to promote recovery. Examining the number of youth, adults, and older adults who receive both substance abuse and mental health treatment provides an indication of how well these two service delivery systems are coordinated for different groups who have different needs. This indicator also provides an estimate of the number of youth, adults, and older adults who have co-occurring mental illness and substance abuse disorders.

Operational Measures: The number of children/youth (0-17), adult (18-59), and older adult (60+ years) mental health outpatient service recipients who also received DASA services at some point in time in the Fiscal Year divided by the total number of children/youth (0-17 years), adult (18-59 years), and older adult (60+ years) mental health outpatient service recipients in the same Fiscal Year.

Formulas:

Number of mental health outpatient service recipients who received DASA services at any time during the Fiscal Year

{0-17, 18-59, 60+ yrs}

Number of outpatient mental health service recipients in the Fiscal Year {0-17, 18-5, 60+ yrs}

Discussion: These numbers are likely an underestimate of the true number of service recipients with co-occurring and substance abuse disorders. However, they do reflect the number of clients who received services from both MHD and DASA in Washington State. Adults represent the majority of those DASA and MHD co-serve, followed by children and youth.

- ▶ The Research and Data Analysis (RDA) Branch of DSHS compiled this data. The specific data source is the Client Services Database (CSDB). The data was pulled in December, 2002. Fiscal Year 2002 data was not available at the time of this report.
- Mental health outpatient service recipients include all clients who received any amount and type of outpatient mental health services (including residential, 24-hr crisis, and crisis hotline) in the Fiscal Year. RDA generated these counts.
- DASA services include: Detoxification, ADATSA Assessments, Residential Treatment, Outpatient Treatment, and Opiate Substitution Treatment
- RDA uses a slightly different method of assigning clients to RSNs than the mental health division, which may result in a slightly different number of outpatient recipients by RSN.

Outpatient Clients who Received DASA and MHD Services by Age - Youth (0-17 yrs) Quality VI.B. Calc. 12/2002 RDA **FY00 FY01** # of MHD # of DASA %of Clients # of MHD # of DASA %of Clients **RSN** Clients Clients Served Served by MHD **Clients Clients Served** Served by MHD Served by MHD and DASA **Served** by MHD and DASA Northeast 412 19 4.6% 406 22 5.4% **Grays Harbor** 669 40 6.0% 702 39 5.6% 45 Timberlands 831 5.4% 885 54 6.1% Southwest 944 40 4.2% 1,099 59 5.4% Chelan / Douglas 506 25 4.9% 644 48 7.5% North Central 662 14 2.1% 765 21 2.7% Thurston / Mason 1,147 69 6.0% 1,406 76 5.4% Clark 2,200 141 6.4% 2,443 188 7.7% Peninsula 1,598 138 8.6% 1,704 135 7.9% Spokane 2,161 165 7.6% 2,708 196 7.2% Greater Columbia 5.8% 3,951 301 3,630 211 7.6% Pierce 4,590 280 6.1% 4,926 343 7.0% North Sound 4,805 298 6.2% 5,300 345 6.5%

5.6%

7,233

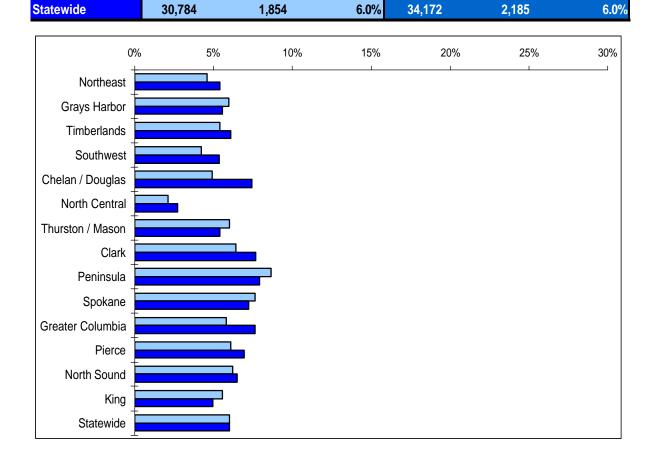
358

4.9%

369

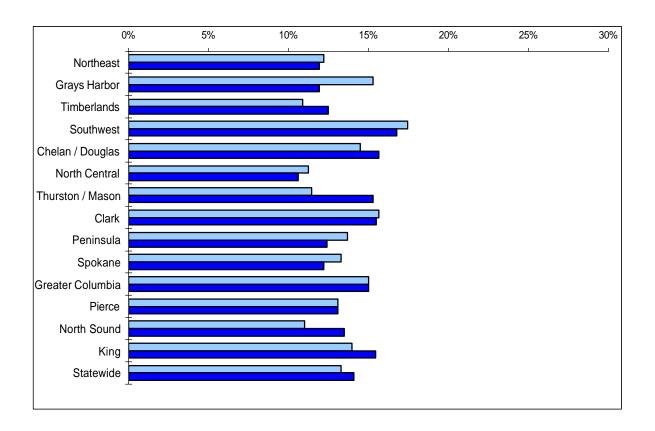
King

6,629



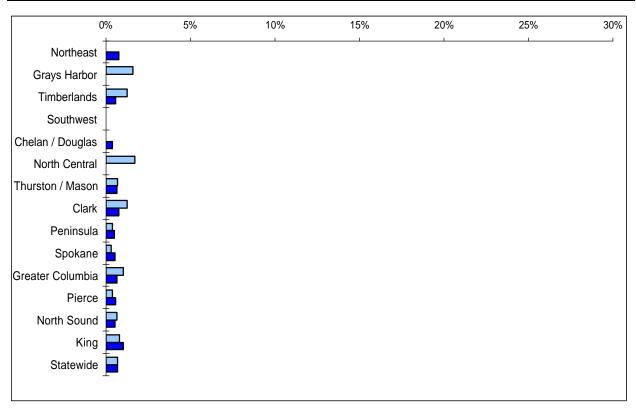
Outpatient Clients who Received DASA and MHD Services by Age - Adul	ts
(18-59 yrs)	

Quality VI.B.			Calc. 12/2002 RDA				
		<u>FY00</u>		<u>FY01</u>			
RSN	# of MHD Clients Served	# of DASA Clients Served by MHD	% of Clients Served by MHD and DASA	Clients	# of DASA Clients Served by MHD	% of Clients Served by MHD and DASA	
Northeast	899	110	12.2%	923	110	11.9%	
Grays Harbor	1,189	182	15.3%	1,314	157	11.9%	
Timberlands	1,449	158	10.9%	1,599	200	12.5%	
Southwest	2,076	362	17.4%	2,661	446	16.8%	
Chelan / Douglas	1,181	171	14.5%	1,398	219	15.7%	
North Central	1,288	145	11.3%	1,621	172	10.6%	
Thurston / Mason	2,468	283	11.5%	2,802	428	15.3%	
Clark	3,091	484	15.7%	4,162	645	15.5%	
Peninsula	3,517	482	13.7%	4,105	510	12.4%	
Spokane	4,829	642	13.3%	5,896	719	12.2%	
Greater Columbia	6,843	1,026	15.0%	7,213	1,082	15.0%	
Pierce	10,055	1,315	13.1%	11,010	1,441	13.1%	
North Sound	11,866	1,308	11.0%	10,483	1,414	13.5%	
King	12,950	1,811	14.0%	16,787	2,591	15.4%	
Statewide	63,701	8,479	13.3%	71,974	10,134	14.1%	



Outpatient Clients who Received DASA and MHD Services by Age - Older Adults (60+ yrs)

Quality VI.B.			Calc. 12/2002 RDA				
		<u>FY00</u>			<u>FY01</u>		
RSN	# of MHD Clients Served	# of DASA Clients Served by MHD	% of Clients Served by MHD and DASA	Clients	# of DASA Clients Served by MHD		
Northeast	124	0	0.0%	128	1	0.8%	
Grays Harbor	312	5	1.6%	258	0	0.0%	
Timberlands	547	7	1.3%	511	3	0.6%	
Southwest	206	0	0.0%	308	0	0.0%	
Chelan / Douglas	248	0	0.0%	266	1	0.4%	
North Central	174	3	1.7%	238	0	0.0%	
Thurston / Mason	285	2	0.7%	311	2	0.6%	
Clark	400	5	1.3%	652	5	0.8%	
Peninsula	807	3	0.4%	771	4	0.5%	
Spokane	1,244	4	0.3%	1,311	7	0.5%	
Greater Columbia	1,174	12	1.0%	1,228	8	0.7%	
Pierce	1,624	6	0.4%	1,865	11	0.6%	
North Sound	1,505	10	0.7%	1,633	9	0.6%	
King	3,518	29	0.8%	3,909	40	1.0%	
Statewide	12,168	86	0.7%	13,389	91	0.7%	



QUALITY VII. Mental Health Outpatient Clients who had a Mental Illness and Substance Abuse Disorder

A. Operational Definition: Percentage of mental health outpatient service recipients who had both a mental illness diagnosis and a substance abuse diagnosis and/or substance abuse impairment in the Calendar Year by RSN and Statewide for CALENDAR YEAR 2002 only.

Rationale for Use: Examining the number of clients who have a co-occurring disorder indicates how well the mental health system identifies people with co-occurring disorders and provides an indication of the need for integrated substance abuse and mental health services.

Operational Measures: The number of outpatient service recipients who had a mental illness diagnosis and a substance abuse diagnosis or substance abuse impairment during the Calendar Year divided by the total number of outpatient service recipients in the same Calendar Year.

Formulas:

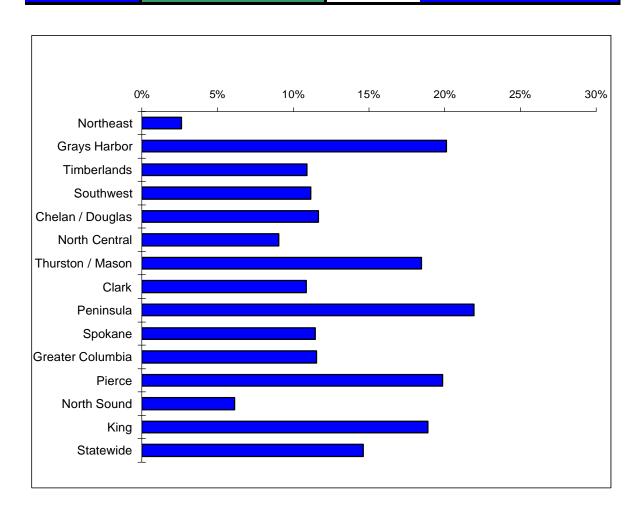
Number of outpatient service recipients who had a mental illness diagnosis <u>and</u> a substance abuse diagnosis and/or substance abuse impairment in the Calendar Year by RSN

Number of outpatient service recipients in the Calendar Year by RSN

Discussion: This indicator shows the percentage of outpatient mental health service recipients who have both a mental illness and substance use disorder. In Washington State, 15% of publicly funded mental health outpatients have an identified co-occurring mental illness and substance abuse disorder.

- Prior to January 2002, information on a client's diagnosis was not reported to the MHD. Starting in January 2002, RSNs were required to report client's diagnoses. Diagnoses are reported using the ICD-9 classification system.
- Substance Abuse disorder is defined using two elements from the January 2002 Data Dictionary: (1) a substance abuse diagnosis at any time in the CY and/or (2) a substance abuse impairment kind of "D" at any time in the CY.
- A person's diagnosis is determined by taking the most recent diagnosis in each of the 4 categories (primary axis I & II, secondary axis I & II) and applying a precedence table to pick one diagnosis from the possible 4. A mental illness diagnosis includes all mental illness diagnoses except dementia, mental retardation, autism, or personality disorders.
- ▶ The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in each RSN in which they received services). The Statewide counts show the number of unduplicated clients across RSNs (i.e. even if a person receives services in more than one RSN, they are only counted once in the statewide total).
- Data source is Service Utilization database (data set = periodics2003).

Outpatient Clients who Have a Substance Abuse Disorder/Impairment									
Quality VII.A.	Calendar Yea	ar 2002 Only	Calc. 5/2003 SAS						
RSN	# of Clients with Co- Occurring Disorder	Total Served	% of Total Served						
Northeast	47	1,792	2.6%						
Grays Harbor	454	2,256	20.1%						
Timberlands	460	4,228	10.9%						
Southwest	506	4,536	11.2%						
Chelan / Douglas	306	2,621	11.7%						
North Central	238	2,633	9.0%						
Thurston / Mason	931	5,039	18.5%						
Clark	773	7,124	10.9%						
Peninsula	1,492	6,798	21.9%						
Spokane	1,166	10,185	11.4%						
Greater Columbia	1,874	16,240	11.5%						
Pierce	3,146	15,841	19.9%						
North Sound	1,096	17,924	6.1%						
King	5,900	31,228	18.9%						
Statewide	18,772	128,445	14.6%						



QUALITY VII. Mental Health Outpatient Clients who had a Mental Illness and Substance Abuse Disorder by Age Group

B. Operational Definition: Percentage of children, adults and older adult mental health outpatient service recipients who had and a mental illness diagnosis and a substance abuse diagnosis and/or substance abuse impairment in the Calendar Year by RSN and Statewide.

Rationale for Use: Examining the number of children, adults, and older adults who have a co-occurring disorder indicates how well the mental health system identifies people in different age groups with co-occurring disorders and provides an indication of the need for co-occurring disorder services among the different age groups.

Operational Measures: The number of children, adults, and older adult outpatient service recipients who had a mental illness diagnosis and a substance abuse diagnosis and/or substance abuse impairment at some point in time in the Calendar Year divided by the total number of children, adult, and older adult outpatient service recipients in the same Calendar Year.

Formulas:

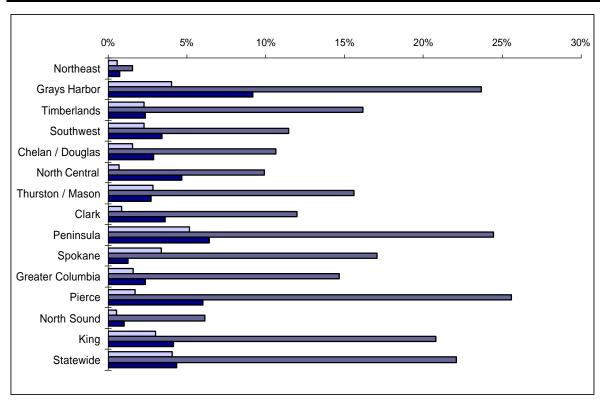
Number of outpatient service recipients who had a mental illness diagnosis <u>and</u> a substance abuse diagnosis and/or substance abuse impairment in the Calendar Year {0-17, 18-59, 60+}

Number of outpatient service recipients in the Calendar Year {0-17, 18-59, 60+}

Discussion: This indicator shows the percentage of children, adult, and older adult outpatient mental health service recipients who have both a mental illness and substance use disorder. In Washington State, 22% of adult outpatient service recipients have an identified co-occurring mental illness and substance abuse disorder. Four percent of youth and 4% of older adults are also identified as having a co-occurring mental illness and substance abuse disorder.

- Prior to January 2002, information on a client's diagnosis was not reported to the MHD. Starting in January 2002, RSNs were required to report client's diagnoses.
- Substance Abuse disorder is defined using two elements from the January 2002 Data Dictionary: (1) an ICD-9 substance abuse diagnosis at any time in the CY and/or (2) a substance abuse impairment kind of "D" as defined in the January 2002 Data Dictionary at any time in the CY.
- A person's diagnosis is determined by taking the most recent diagnosis in each of 4 categories (primary axis I & II, secondary axis I & II) and applying a precedence table to pick one diagnosis. A mental illness diagnosis includes all mental illness diagnoses except dementia, mental retardation, autism, or personality disorders.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in each RSN in which they received services). The Statewide counts show the number of unduplicated clients across RSNs (i.e. even if a person receives services in more than one RSN, they are only counted once in the statewide total).
- Data source is Service Utilization database (data set = periodics2003).

Outpatient Clients who Have a Substance Abuse Disorder/Impairment by Age												
Calendar Year 2002 Only												
Quality VII.B. Calc. 5/2003												
	A 1 16	/40 50		Older A	dults (60+						
	<u>Youth</u>	(U-17 yı	<u>rs)</u>	<u>Adults</u>	(18-59)	<u>yrs)</u>		rs)				
RSN	# of Clients with Co- Occurring Disorder	Total Served	% of Total Served	# of Clients with Co- Occurring Disorder	Total Served	% of Total Served	# of Clients with Co- Occurring Disorder	Total Served	% of Total Served			
Northeast	3	509	0.6%	18	1,146	1.6%	1	136	0.7%			
Grays Harbor	31	773	4.0%	292	1,233	23.7%	23	250	9.2%			
Timberlands	24	1,054	2.3%	376	2,323	16.2%	20	850	2.4%			
Southwest	28	1,228	2.3%	352	3,072	11.5%	8	235	3.4%			
Chelan / Douglas	12	776	1.5%	167	1,570	10.6%	8	275	2.9%			
North Central	6	869	0.7%	160	1,614	9.9%	7	149	4.7%			
Thurston / Mason	44	1,534	2.9%	496	3,178	15.6%	9	327	2.8%			
Clark	23	2,639	0.9%	487	4,067	12.0%	15	416	3.6%			
Peninsula	88	1,704	5.2%	1035	4,234	24.4%	55	858	6.4%			
Spokane	99	2,935	3.4%	956	5,608	17.0%	21	1,641	1.3%			
Greater Columbia	81	5,118	1.6%	1409	9,610	14.7%	36	1,510	2.4%			
Pierce	80	4,630	1.7%	2552	9,974	25.6%	68	1,127	6.0%			
North Sound	31	5,882	0.5%	654	10,675	6.1%	14	1,361	1.0%			
King	245	8,101	3.0%	3989	19,171	20.8%	162	3,896	4.2%			
Statewide	1,516	37,257	4.1%	16,692	75,511	22.1%	561	12,898	4.3%			



QUALITY VIII. Adult Outpatient Clients who Reported that they Received Physical Healthcare

A. Operational Definition: Percentage of adults who reported on the MHSIP Adult Consumer Survey that they saw a nurse or doctor in the past year for a health check up or because they were sick.

Rationale for Use: Assisting clients in accessing services to meet their needs, including physical healthcare, is a major value of the mental health system. People diagnosed with mental illness have higher than average rates of certain cancers, heart disease, and respiratory illnesses. Identifying and monitoring a person's physical health is essential to facilitate a person's recovery from mental illness.

Operational Measures: The number of adult (18 years or above) outpatient service recipients who responded yes to item #40 on the MHSIP Adult Consumer Survey divided by the total number of adults who completed the MHSIP Adult Consumer Survey in Fiscal Year 2002.

#(40) In the last year, did you see a medical doctor (or nurse) for a health check-up or because you were sick?

Formulas:

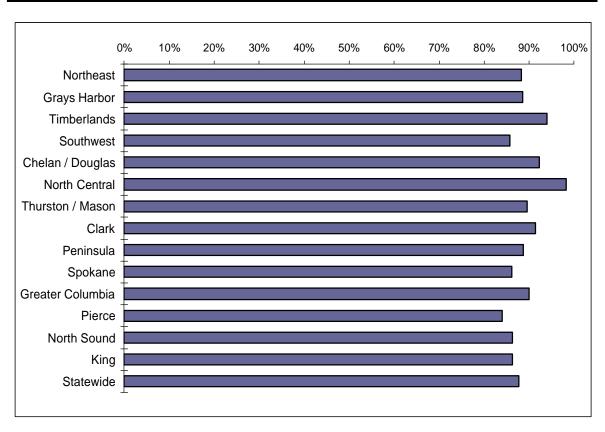
Number of adults (18 years or older) who responded yes to item #40 of the MHSIP Adult Survey

Number of adults (18 years or older) who completed the MHSIP Adult Consumer Survey

Discussion: This indicator shows the percentage of adults (18 or above) who saw a nurse or doctor in the past year for a health check up or because they were sick. 87.6% of survey respondents reported that they had received physical healthcare in the last year.

- The MHSIP Adult Consumer Survey is a confidential, self-reported measure collected every other year. The first time the survey was collected was in Fiscal Year 2002.
- Adults 18 years or older are interviewed for the survey.
- ▶ Trained consumer telephone interviewers conducted the survey.
- The response rate for the survey was.33%.
- A copy of report <u>Perceptions of Mental Health Services 2002 Adult Consumer Survey</u> prepared by The Washington Institute for Mental Illness Research and Training Western Branch is available from: Judy Hall, Ph.D., Mental Health Division or from the Washington Institute's Website http://depts.washington.edu/wimirt/Publications.htm.

Outpatient Clients who Reported Receiving Physical Healthcare Services									
Quality VIII. A.			Calc.3/2003 SPSS						
	<u>FY02</u>	- Adult Consumer	<u>Survey</u>						
RSN	# of Respondents who Saw a Nurse/Doctor in Past Year	Total Surveyed	% of Total Surveyed						
Northeast	30	34	88.2%						
Grays Harbor	31	35	88.6%						
Timberlands	31	33	93.9%						
Southwest	60	70	85.7%						
Chelan / Douglas	12	13	92.3%						
North Central	57	58	98.3%						
Thurston / Mason	60	67	89.6%						
Clark	107	117	91.5%						
Peninsula	102	115	88.7%						
Spokane	131	152	86.2%						
Greater Columbia	269	299	90.0%						
Pierce	220	262	84.0%						
North Sound	226	262	86.3%						
King	430	498	86.3%						
Statewide	1,766	2,015	87.6%						



QUALITY IX. Percentage of Clients who Received Outpatient Services Within 7 and 30 Days After Being Discharged from the Hospital

A. Operational Definition: Percentage of clients who received outpatient services within 7 and 30 days after being discharged from the state hospital, community hospital, or evaluation and treatment center.

Rationale for Use: Providing continuity of care is a major value held by the Mental Health Division. Providing clients with timely access to outpatient services following hospitalization is essential for establishing and maintaining clients in the community without repeat hospitalizations.

Operational Measures: The number of clients who were discharged from a State Hospital, Community Hospital, or Evaluation and Treatment center in the Fiscal Year and who received outpatient services within 7 and 30 days divided by the number of clients discharged from state or community hospital and E&Ts in the fiscal year.

Formulas:

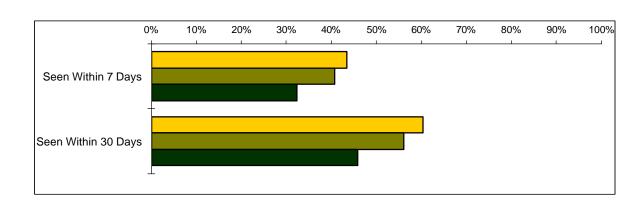
Number of people who were discharged from State or Community Hospitals, or Evaluation and Treatment Centers and who were seen in outpatient services in a Fiscal Year {7 days following discharge; 30 days following discharge}

Number of people discharged from State or Community Hospitals, and Evaluation and Treatment Centers in the Fiscal Year

Discussion: All people discharged from State or Community Hospitals, and Evaluation and Treatment Centers are not eligible or appropriate for outpatient mental health services. Some people upon discharge go into the VA system, prisons/jails, nursing homes, see private providers, or move outside the state. However the results show that the number of people being seen after discharge from a hospital has decreased dramatically. The number of people seen within 30 days of discharge has fallen to earlier levels reported for those seen within 7 days.

- If a person has less than 7 days between a hospital discharge and admission this is considered one episode. For the purposes of this indicator, a person is only considered discharged at the end of the episode.
- ▶ To be included in the numerator the person had to be discharged (as defined above) in the Fiscal Year, but the outpatient services can occur beyond the Fiscal Year (i.e. a person was discharged on 6/2001, but didn't receive outpatient services until 7/2001 this person would be included in the numerator).
- To be included in the denominator the person had to be discharged (as defined above) from one of the hospital settings within the Fiscal Year.
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.
- Data source is Service Utilization database (data set = iplinks) created from the state hospital census files (HIS) and the MMIS system.

Clients who	Clients who Received Outpatient Services Within 7 & 30 Days of Discharge											
Quality IX.A. Calc. 4/2003 SAS												
Outpatient Status		<u>FY00</u>			<u>FY01</u>		<u>FY02</u>					
	# Seen	# Discharged	% Seen	# Seen	# Discharged	% Seen	# Seen	# Discharged	% Seen			
Seen Within 7 Days	4,262	9,811	43.4%	5,228	12,835	40.7%	3,280	10,138	32.4%			
Seen Within 30 Days	5,927	9,811	60.4%	7,204	12,835	56.1%	4,653	10,138	45.9%			



QUALITY X. Percentage of People Readmitted within 30 Days of Being Discharged from the Hospital

A. Operational Definition: Percentage of clients who were discharged from a State or Community Hospital, or Evaluation and Treatment center and who were readmitted to any of the inpatient settings within 30 days.

Rationale for Use: Maintaining clients in the community is a major value of the mental health system. Clients who cycle in and out of the hospital may not be getting appropriate services to maintain them in the community. Rapid readmission, and "revolving door" admissions to the hospital are very costly to the system.

Operational Measures: The number of people who were readmitted to a State or Community Hospital, or Evaluation and Treatment center within 30 days of being discharged divided by the total number of people discharged from these settings in a Fiscal Year.

Formulas:

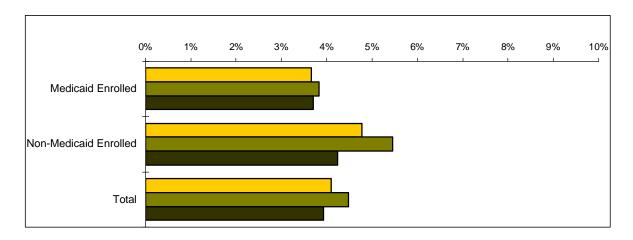
Number of people who were discharged from a State or Community Hospital, or Evaluation and Treatment Center in the Fiscal Year and were readmitted within 30 days

Number of people who were discharged from a State or Community Hospital, or Evaluation and Treatment Center in the Fiscal Year

Discussion: This indicator shows the percentage of people who were readmitted within 30 days of being discharged from the hospital. The percentage of readmission is very low, about 4% of all discharges. However, the rate of readmission is higher for non-Medicaid enrolled consumers who have fewer community resources available.

- If a person has less than 7 days between a hospital discharge and readmission, then this is considered to be the same hospital admission. For the purposes of this indicator, a person is only considered discharged at the end of an admission.
- To be included in the numerator the person had to be discharged (as defined above) in the Fiscal Year, but the readmission can occur beyond the Fiscal Year (i.e. a person was discharged on 6/2001, but didn't get readmitted until 7/2001 this person would be included in the numerator).
- To be included in the denominator the person had to be discharged (as defined above) from one of the hospital settings within the Fiscal Year.
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.
- Data source is Service Utilization database (data set = iplinks, tempsch) created from the state hospital census files (HIS) and the MMIS system.
- A client is considered to be in the Medicaid enrolled population for the entire Fiscal year if they received any amount of Medicaid funded service during that Fiscal Year.
- Data source for counting the number of people in the Medicaid population is the Mental Health Division Ad Hoc System.

	Clients Readmitted Within 30 days of Being Discharged Quality X.A. Calc. 4/2003 SA:											
Quality X.A. Medicaid		FY2000			FY2001		FY2002					
Status	within 30 Days	# Discharged	% Re- admitted		# Discharged	% Re- admitted	within 30 Days	# Discharged	% Re admitted			
Medicaid Enrolled	219	5,980	3.7%	297	7,759	3.8%	215	5,814	3.7%			
Non- Medicaid Enrolled	183	3,831	4.8%	277	5,076	5.5%	183	4,324	4.2%			
Total	402	9,811	4.1%	574	12,835	4.5%	398	10,138	3.9%			



QUALITY XI. Percentage of Outpatient Clients Who Were Not Hospitalized by RSN

A. Operational Definition: Percentage of people who received outpatient services and who were not hospitalized in any setting in a Fiscal Year by RSN.

Rationale for Use: Maintaining clients in the community is a major value of the mental health system. Clients who are hospitalized and those who cycle in and out of the hospital are not being maintained in the community and are very costly to the system.

Operational Measures: The number of people who received outpatient services and who were not hospitalized in a State Hospital, CLIP facility, Community Hospital, or Evaluation and Treatment center in a Fiscal Year divided by the total number of people who received outpatient services in a Fiscal Year.

Formula:

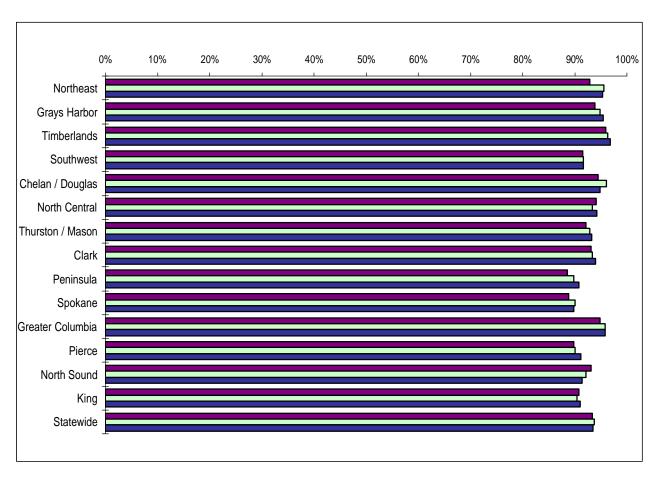
Number of people who received outpatient services in a Fiscal Year and who were not hospitalized in a SH, CH, CLIP Facility or E&T at any time during the same Fiscal Year

Number of people who received outpatient services in a Fiscal Year

Discussion: The majority of outpatient service recipients do not use any of the hospital alternatives. Overall, 93.5% of mental health consumers receive only community outpatient mental health services. There is very little variation across RSNs. Because only a very small number of clients use inpatient services, the indicator remains stable over time. While this information provides useful context regarding the relative proportions of the inpatient and outpatient systems, other indicators in this report, such as the state and community hospital utilization rates, readmission rates, and rates of follow up in the community provide more detailed and actionable information regarding inpatient services.

- ▶ Data source is Service Utilization database (data set = su2003) created from the state hospital census files (HIS) and the MMIS system.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.

Outpatient Clients Who Were Not Hospitalized by RSN													
Quality XI.A.													
	E	<u>Y00</u>		<u> </u>	<u>Y01</u>		<u> </u>	Y02					
RSN	# of Clients Not Hospitalized	Total Served	% of Total Served	# of Clients Not Hospitalized	Total Served	% of Total Served	# of Clients Not Hospitalized	Total Served	% of Total Served				
Northeast	1,536	1,655	92.8%	1,446	1,514	95.5%	1,620	1,699	95.4%				
Grays Harbor	2,114	2,254	93.8%	2,212	2,333	94.8%	2,172	2,277	95.4%				
Timberlands	2,857	2,978	95.9%	3,179	3,301	96.3%	3,568	3,686	96.8%				
Southwest	2,673	2,921	91.5%	3,517	3,840	91.6%	4,183	4,565	91.6%				
Chelan / Douglas	2,185	2,312	94.5%	2,569	2,675	96.0%	2,493	2,629	94.8%				
North Central	2,570	2,731	94.1%	2,563	2,745	93.4%	2,607	2,766	94.3%				
Thurston / Mason	3,743	4,062	92.1%	4,140	4,459	92.8%	4,498	4,826	93.2%				
Clark	5,881	6,320	93.1%	6,385	6,839	93.4%	6,593	7,017	94.0%				
Peninsula	5,398	6,091	88.6%	6,026	6,715	89.7%	6,089	6,705	90.8%				
Spokane	7,431	8,368	88.8%	8,642	9,600	90.0%	9,159	10,198	89.8%				
Greater Columbia	11,803	12,444	94.8%	14,468	15,105	95.8%	15,292	15,954	95.9%				
Pierce	15,518	17,290	89.8%	16,724	18,570	90.1%	15,892	17,437	91.1%				
North Sound	17,855	19,188	93.1%	16,858	18,295	92.1%	16,437	17,995	91.3%				
King	22,174	24,424	90.8%	24,421	27,003	90.4%	27,238	29,945	91.0%				
Statewide	103,738	111,131	93.3%	113,150	120,717	93.7%	117,841	126,069	93.5%				



QUALITY XI. Percentage of Outpatient Clients Who Were Not Hospitalized by Age

B. Operational Definition: Percentage of youth, adults, and older adults who received outpatient services and who were not hospitalized in any setting in a fiscal year statewide.

Rationale for Use: Maintaining clients in the community is a major value of the mental health system. Clients who are hospitalized and those who cycle in and out of the hospital are not being maintained in the community and are very costly to the system. Looking at this indicator by age allows examination of any differences that may exist among the different groups.

Operational Measures: The number of youth, adults, and older adults who received outpatient services and who were not hospitalized in a state hospital, community hospital, or evaluation and treatment center in a Fiscal Year divided by the total number of youth, adults, and older adults who received outpatient services in a Fiscal Year.

Formula:

Number of people who received outpatient services in a Fiscal Year and who were not hospitalized in a SH, CH, Clip Facility or E&T at any time during the same Fiscal Year by age group

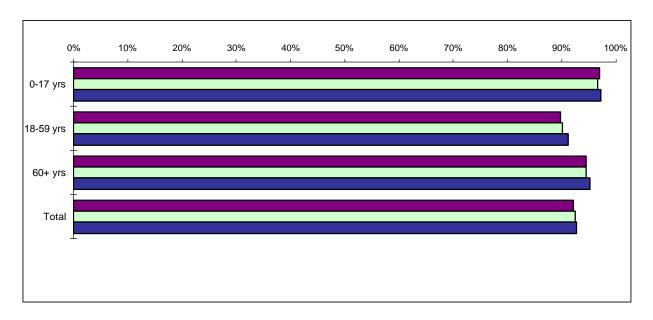
{0-17; 18-59, 60+}

Number of people who received outpatient services in a Fiscal Year {0-17; 18-59; 60+}

Discussion: The majority of outpatient service recipients do not use any of the hospital alternatives. Overall, 93.5% of mental health consumers receive only community outpatient mental health services. There is very little variation across RSNs. Because only a very small number of clients use inpatient services, the indicator remains stable over time. While this information provides useful context regarding the relative proportions of the inpatient and outpatient systems, other indicators in this report, such as the state and community hospital utilization rates, readmission rates, and rates of follow up in the community provide more detailed and actionable information regarding inpatient services.

- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.
- Data source is Service Utilization database (data set = su2003).
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Age is calculated based on January 1st of the Fiscal Year.

	Outpatient Clients Who Were Not Hospitalized by Age Group										
Quality XI.B.	Ē		E	<u>Y01</u>		Calc. 4/2003 SAS <u>FY02</u>					
Age	# of Clients Not Hospitalized	Total Served	% of Total Served	# of Clients Not Hospitalized	Total Served	% of Total Served	# of Clients Not	Total Served	% of Total Served		
0-17 yrs	31,623	32,601	97.0%	34,206	35,392	96.6%	35,858	36,873	97.2%		
18-59 yrs	59,202	65,920	89.8%	65,004	72,139	90.1%	68,699	75,313	91.2%		
60+ yrs	11,620	12,301	94.5%	12,458	13,186	94.5%	12,334	12,963	95.1%		
Total	102,445	111,131	92.2%	111,668	120,717	92.5%	116,891	126,069	92.7%		



QUALITY XI. Percentage of Outpatient Clients Who Were Not Hospitalized by Race/Ethnicity

C. Operational Definition: Percentage of outpatient service recipients who were not hospitalized in any setting in a Fiscal Year statewide by Race/Ethnicity

Rationale for Use: Maintaining clients in the community is a major value of the mental health system. Clients who cycle in and out of the hospital are not being maintained in the community and are very costly to the system. Looking at this indicator by Race/Ethnicity allows examination of any differences that may exist among the different groups.

Operational Measures: The number of African Americans, Asian or Pacific Islanders, Caucasians, Hispanics, and Native Americans who received outpatient services and who were not hospitalized in a state hospital, community hospital, or evaluation and treatment center in a Fiscal Year divided by the total number of African Americans, Asian or Pacific Islanders, Caucasians, Hispanics, and Native Americans who received outpatient services in a Fiscal Year.

Formulas:

Number of people who received outpatient services in a Fiscal Year and who were not hospitalized in a SH, CL, CH, or E&T at any time during the same Fiscal Year by race/ethnicity

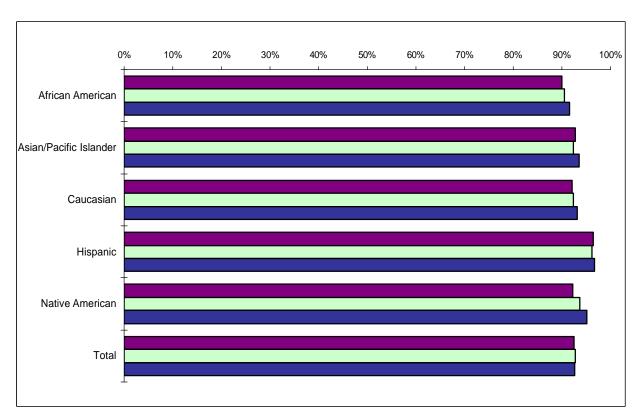
{ Asian/Pac. Islanders Afr. Americans, Caucasians, Hispanics, and Nat. Americans}

Number of people who received outpatient services in a Fiscal Year {Asian/Pac. Islanders, Afr. Americans, Caucasians, Hispanics, and Nat. Americans}

Discussion: There are no major differences among ethnic groups on this indicator. The majority of outpatient service recipients do not use any of the hospital alternatives. Overall, 93.5% of mental health consumers receive only community outpatient mental health services. There is very little variation across RSNs. Because only a very small number of clients use inpatient services, the indicator remains stable over time. While this information provides useful context regarding the relative proportions of the inpatient and out patient systems, other indicators in this report, such as the state and community hospital utilization rates, readmission rates, and rates of follow up in the community provide more detailed and actionable information regarding inpatient services.

- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Race/ethnicity is calculated using the data elements of ethnicity and Hispanic origin. If Hispanic origin is reported as positive, then the individual is counted as Hispanic, and in no other category. In 2002, multiracial is included in the other category.
- If a client has more than one ethnicity reported during a Fiscal Year, then the most recent ethnicity is used.
- Data source is Service Utilization database (data set = su2003).
- Only Fiscal Year 2001 includes Puget Sound Behavioral Health.

Outpatient Cli	Outpatient Clients Who Were Not Hospitalized by Race/Ethnicity										
Quality XI.C.	<u>F</u>	<u>Y00</u>		<u>FY01</u>			Calc. 4/2003 SAS FY02				
Ethnicity	# of Clients Not Hospitalized	Total Served	% of Total Served	# of Clients Not Hospitalized	Total Served	% of Total Served	# of Clients Not Hospitalized	Total Served	% of Total Served		
African American	6,336	7,042	90.0%	7,084	7,821	90.6%	7,615	8,314	91.6%		
Asian/Pacific Islander	2,635	2,840	92.8%	2,837	3,071	92.4%	2,765	2,956	93.5%		
Caucasian	73,789	80,063	92.2%	79,808	86,383	92.4%	81,592	87,549	93.2%		
Hispanic	6,643	6,891	96.4%	7,805	8,114	96.2%	8,714	9,004	96.8%		
Native American	2,908	3,152	92.3%	3,647	3,891	93.7%	3,800	3,992	95.2%		
Total	102,753	111,131	92.5%	111,944	120,717	92.7%	116,794	126,069	92.6%		



Outcome of Services

The Outcome Indicators are currently under development. The indicators listed in this section are simple calculations based on a point in time measurement of an individual's status. They are not measures of individual consumers' change while in the mental health service system. They are preliminary baseline data that will be used to build true outcome measures.

These indicators give some information about difference in RSN service populations, but can not be attributed to the service delivery system of the RSN.

OUTCOME I. Employment Status: Adults

A. Operational Definition: Percentage of adult outpatient service recipients (18 – 64 Years) who were employed at any time during a Fiscal Year by RSN and Statewide

Rationale for Use: Employment and productive activity is an important component of role functioning for adults. This measure is influenced by multiple factors, many beyond the scope of the mental health system. Monitoring this indicator for populations with mental illness, however, is critical. Many people with serious mental illness want to obtain and maintain competitive employment. Job skills, training, job coaching, and supported employment has been found to be successful in helping individuals reach their employment goals, and promoting recovery.

Operational Measures: The percentage of adult (18 - 64 years) outpatient service recipients who were employed at any time during the Fiscal Year divided by the total number of adult (18 years or older) outpatient service recipients in the same Fiscal Year.

Formula:

Adult outpatient service recipients who were employed at any time during the Fiscal Year

Number of adult outpatient service recipients in the Fiscal Year

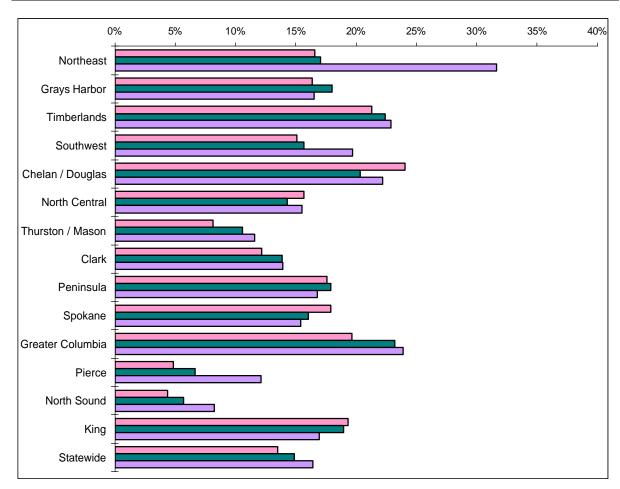
Discussion: If a consumer is employed for any portion of the Fiscal Year they are counted in this indicator. Review of employment in 16-18 year olds and individuals over 64 found very small rates of employment. They are, therefore, not included in this report. Currently, this is only a snapshot or status measure and does not show change over time. An indicator to measure change in employment status over time is currently under development

- ▶ The National Association of State Mental Health Program Directors (NASMHPD) reports this indicator for adults from 18-64 years of age, because this is the standard employment age and the recommendation.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Age is calculated as of January 1st for each Fiscal Year.
- Prior to January 2002, employment was defined using the Employment data element in the January 2000 Data Dictionary. Employment status was reported every 90 days or as part of the monthly case status. For 2000 and 2001, a person was considered employed if they were reported in the category paid employment (1) at any point in time in the Fiscal Year. For 2002, a person was considered employed if they were reported in the following categories: (1) employment full-time, (3) employment part time, (4) supported employment, and (5) employed sheltered workshops
- ▶ The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in <u>each</u> RSN in which they received services).
- ▶ Data Source is Service Utilization database (data set = outcomes).

Percentage of Adults (18-64 yrs) Employed at Any Time During a Fiscal Year

Outcome I. A. Calc. 4/2003 SAS

RSN	<u>FY00</u>			<u> </u>	<u>Y01</u>		<u>FY02</u>		
KON	Employed	Served	%	Employed	Served	%	Employed	Served	%
Northeast	175	1,057	16.6%	162	950	17.1%	353	1,116	31.6%
Grays Harbor	208	1,271	16.4%	240	1,333	18.0%	222	1,344	16.5%
Timberlands	334	1,570	21.3%	395	1,763	22.4%	462	2,021	22.9%
Southwest	291	1,927	15.1%	408	2,607	15.7%	618	3,140	19.7%
Chelan / Douglas	359	1,491	24.1%	349	1,715	20.3%	363	1,637	22.2%
North Central	265	1,688	15.7%	253	1,769	14.3%	276	1,777	15.5%
Thurston / Mason	216	2,651	8.1%	310	2,927	10.6%	367	3,170	11.6%
Clark	421	3,464	12.2%	542	3,911	13.9%	568	4,078	13.9%
Peninsula	643	3,656	17.6%	748	4,183	17.9%	846	5,046	16.8%
Spokane	905	5,054	17.9%	922	5,748	16.0%	920	5,965	15.4%
Greater Columbia	1,446	7,357	19.7%	2,081	8,963	23.2%	2,337	9,774	23.9%
Pierce	535	10,988	4.9%	792	11,942	6.6%	1,374	11,329	12.1%
North Sound	554	12,646	4.4%	669	11,714	5.7%	934	11,331	8.2%
King	2,788	14,415	19.3%	3,177	16,744	19.0%	3,235	19,088	16.9%
Statewide	9,140	67,730	13.5%	11,048	74,228	14.9%	12,875	78,284	16.4%



OUTCOME II. Employment Status: Adult Volunteer Work

A. Operational Definition: Percentage of adult outpatient service recipients (18 - 64) who were engaged in volunteer work at any point in time during a Fiscal Year.

Rationale for Use: Employment and productive activity is an important component of role functioning for adults. This measure is influenced by multiple factors, many beyond the scope of the mental health system. Monitoring this indicator for populations with mental illness, however, is critical. Many people with serious mental illness want to participate in valued roles in society, which include volunteer activities. Volunteer work can also be a vehicle for returning to paid work.

Operational Measures: The percentage of adult (18-64) outpatient service recipients who were engaged in volunteer work at any point in time during the Fiscal Year by RSN divided by the total number of adult (18-64) outpatient service recipients in the same Fiscal Year by RSN.

Formula:

Number of adult outpatient service recipients in volunteer work at any time during the Fiscal Year by RSN

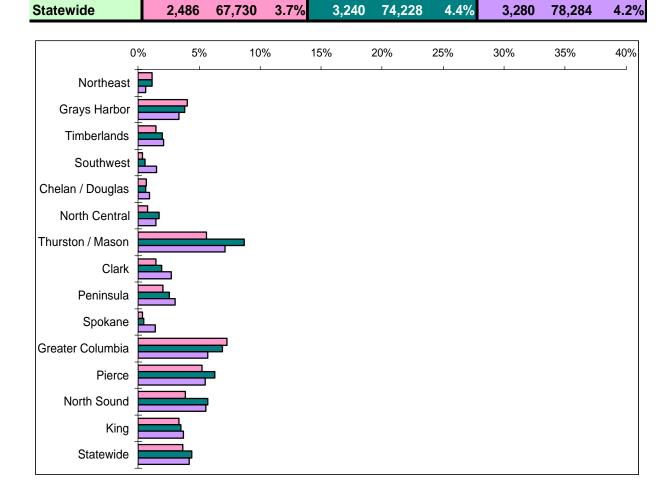
Number of adult outpatient service recipients in the Fiscal Year by RSN

Discussion: If a consumer volunteered for any portion of the Fiscal Year they are counted in this indicator. Review of volunteer work in 16-18 year olds and individuals over 64 found very small volunteer rates. They are, therefore, not included in this report. Currently, this is only a snapshot or status measure and does not show change over time. An indicator to measure change in volunteer work over time is under development. Rates of volunteer work reported among mental health consumers are very low statewide.

- ▶ The National Association of State Mental Health Program Directors (NASMHPD) only reports this indicator for adults from 18-64 years of age, because this is the standard employment age and the recommendation.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Age is calculated as of January 1st for each Fiscal Year.
- Prior to January 2002, volunteer work was defined using the Employment data element in the January 2000 Data Dictionary. Employment status was reported every 90 days or as part of the monthly case status. For 2000 and 2001, a person was considered engaged in volunteer work if they were reported in the category (2) unpaid employment. For 2002, a person was considered engaged in volunteer work if they are reported in category (6) volunteer work.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in <u>each</u> RSN in which they received services).
- Data source is Service Utilization database (data set = outcomes).

Percent of Adults (18-64 yrs) Who Volunteered During the Fiscal Year

Outcome II. A								Calc. 4/2	003 SAS
RSN	į	FY00_		<u>FY01</u>			<u>FY02</u>		
	Volunteer	Served	%	Volunteer	Served	%	Volunteer	Served	%
Northeast	12	1,057	1.1%	11	950	1.2%	7	1,116	0.6%
Grays Harbor	51	1,271	4.0%	51	1,333	3.8%	45	1,344	3.3%
Timberlands	23	1,570	1.5%	35	1,763	2.0%	42	2,021	2.1%
Southwest	7	1,927	0.4%	15	2,607	0.6%	47	3,140	1.5%
Chelan / Douglas	10	1,491	0.7%	10	1,715	0.6%	15	1,637	0.9%
North Central	13	1,688	0.8%	30	1,769	1.7%	26	1,777	1.5%
Thurston / Mason	148	2,651	5.6%	254	2,927	8.7%	226	3,170	7.1%
Clark	51	3,464	1.5%	75	3,911	1.9%	110	4,078	2.7%
Peninsula	74	3,656	2.0%	108	4,183	2.6%	154	5,046	3.1%
Spokane	17	5,054	0.3%	25	5,748	0.4%	84	5,965	1.4%
Greater Columbia	535	7,357	7.3%	620	8,963	6.9%	557	9,774	5.7%
Pierce	575	10,988	5.2%	749	11,942	6.3%	623	11,329	5.5%
North Sound	488	12,646	3.9%	670	11,714	5.7%	632	11,331	5.6%
King	482	14,415	3.3%	587	16,744	3.5%	712	19,088	3.7%
0	0.400		0 =0/	0.040	=1.000	4 404	0.000		4 00/



OUTCOME III. Living Situation Status: Homelessness- Adult

A. Operational Definition: Percentage of adult outpatient service recipients who had homeless listed as their primary residence at any time in the Fiscal Year.

Rationale for Use: Assisting service recipients in finding and maintaining appropriate housing is a major value of the mental health system. Although homelessness is influenced by a number of factors, many of which reside outside the mental health system, it is an important negative outcome for service recipients. Homelessness can create barriers to receiving services and impact a person's safety and well being. The implications of homelessness can vary according to a person's age (e.g., children who are homeless may have their education disrupted) and addressing homelessness among different age groups requires different interventions.

Operational Measures: The number of adult (18 years or older) outpatient service recipients who had homeless as their primary residence at some point in the Fiscal Year by RSN divided by the total number of adult (18 years or older) outpatient service recipients in the same RSN in the Fiscal Year.

Formula:

Number of adult outpatient recipients with homeless as primary residence at any time in the Fiscal Year by RSN

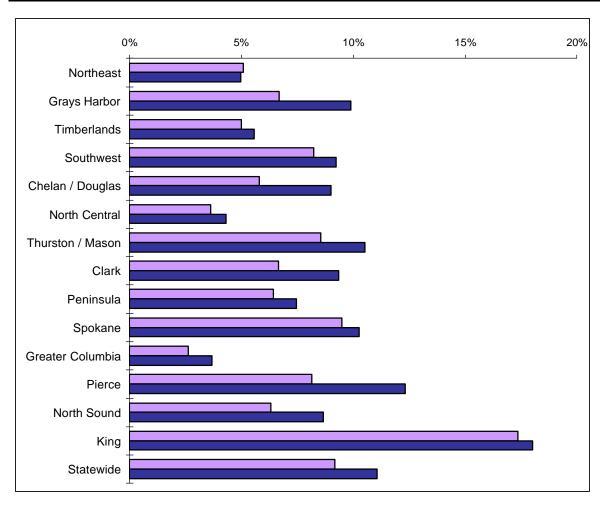
Number of adult outpatient service recipients in the Fiscal Year by RSN

Discussion: This indicator shows the percentage of adult service recipients whose primary residence was homeless at some point in the Fiscal Year. The number of homeless served has increased statewide and for most RSNs. King county RSN continues to report the highest number of homeless served.

- In Fiscal Year 2001 PATH grants existed in King, Pierce, Spokane, Clark, Thurston-Mason, and Snohomish County. In Fiscal Year 2002 PATH grants existed in Clark, Greater Columbia, King, Pierce, Snohomish County, Spokane, Thurston/Mason, and Timberlands.
- Age is calculated as of January 1, for each Fiscal Year.
- Adults are defined as 18 and above.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Prior to January 2002, homeless is defined by the Residential Arrangement Code found in the January 2000 Data Dictionary. If a person is listed with a code 330 (homeless) at any point in time during the Fiscal Year they are considered homeless for the purposes of this indicator.
- After January 1, 2002, homeless is defined by the Living Situation Element found in the January 2002 Data Dictionary. If a person is listed with a code of 70 (homeless) at any point in time during the Fiscal Year they are considered homeless for the purposes of this indicator.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in each RSN in which they received services).
- Data source is Service Utilization database (data set = outcomes).

Percentage of Adults and Older Adults (18+ yrs) Who Were Homeless at Any
Time During the Fiscal Year

Outcome III. A.				Calc. 4/2003 SAS			
RSN		FY01		<u>FY02</u>			
	Homeless	Served	%	Homeless	Served	%	
Northeast	54	1,059	5.1%	59	1,190	5.0%	
Grays Harbor	108	1,613	6.7%	152	1,535	9.9%	
Timberlands	117	2,347	5.0%	150	2,688	5.6%	
Southwest	228	2,773	8.2%	307	3,325	9.2%	
Chelan / Douglas	114	1,964	5.8%	169	1,876	9.0%	
North Central	70	1,929	3.6%	81	1,886	4.3%	
Thurston / Mason	272	3,185	8.5%	360	3,421	10.5%	
Clark	282	4,238	6.7%	408	4,366	9.3%	
Peninsula	314	4,895	6.4%	428	5,747	7.4%	
Spokane	669	7,049	9.5%	751	7,319	10.3%	
Greater Columbia	270	10,252	2.6%	402	10,940	3.7%	
Pierce	1,079	13,260	8.1%	1,519	12,334	12.3%	
North Sound	808	12,801	6.3%	1,068	12,326	8.7%	
King	3,442	19,842	17.3%	3,997	22,183	18.0%	
Statewide	7,827	85,352	9.2%	9,851	89,072	11.1%	



OUTCOME III. Living Situation Status: Independent - Adult

B. Operational Definition: Percentage of adult outpatient service recipients (18 years or older) who had an independent living situation as their primary residence any time during the Fiscal Year by RSN and Statewide.

Rationale for Use: Assisting consumers in finding and maintaining appropriate housing is a major value of the mental health system. Moving consumers to the least restrictive environment possible is a major goal of the system. Although housing is influenced by a number of factors, many of which reside outside the mental health system, it is an important outcome for service recipients.

Operational Measures: The number of adult (18 years or older) outpatient service recipients in a RSN who listed an independent primary residence at some point in time during the Fiscal Year divided by the total number of adult (18 years or older) outpatient service recipients in the RSN in the same Fiscal Year.

Formula:

Number of adult outpatient service recipients in independent living situations at any time during the Fiscal Year

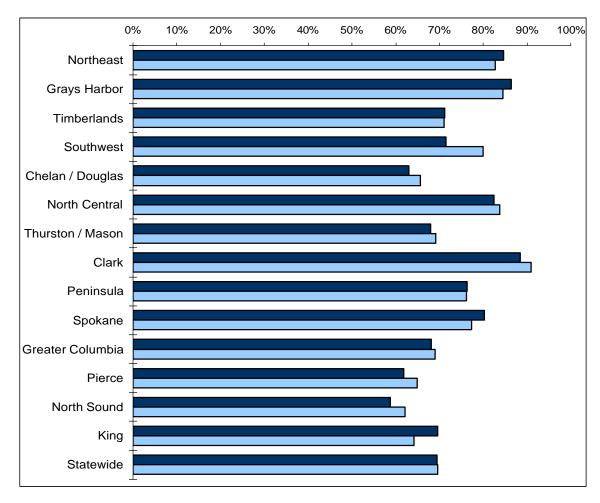
Number of adult outpatient service recipients in the Fiscal Year

Discussion: This indicator shows the percentage of adult consumers who were in independent living situations at some point in time in the Fiscal Year. The percentage of adults living in independent living situations can be impacted by the amount of available low income housing; an individual's functional status; and a person's desire to live independently and the availability of residential alternatives such as group homes, supported housing, and adult family homes. Overall, the majority of consumes served across the state are living in independent settings.

- Age is calculated as of January 1, for each Fiscal Year.
- Prior to January 2002, independent living situation was defined by the Residential Arrangement Code found in the January 2000 Data Dictionary. If a person was listed with a code 310 (own home) or 320 (other's home not by choice) at any time during the Fiscal Year they were considered in an independent living situation for the purposes of this indicator.
- After January 1, 2002, independent living situation is defined by the Living Situation Code found in the January 2002 Data Dictionary. If a person listed with a code 10 (private residence without support) or 20 (private residence with support) at any time during the Fiscal Year they are considered in an independent living situation for the purposes of this indicator.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in <u>each</u> RSN in which they received services).
- Data source is Service Utilization database (data set = outcomes).

Percentage of Adults and Older Adults (18+ yrs) Who Lived Independently at Any Time During the Fiscal Year

Outcome III. B.						calc. 4/2003 SAS		
RSN		FY01			FY02			
	Ind. Living	Served	%	Ind. Living	Served	%		
Northeast	896	1,059	84.6%	985	1,190	82.8%		
Grays Harbor	1,393	1,613	86.4%	1,296	1,535	84.4%		
Timberlands	1,669	2,347	71.1%	1,911	2,688	71.1%		
Southwest	1,984	2,773	71.5%	2,659	3,325	80.0%		
Chelan / Douglas	1,238	1,964	63.0%	1,231	1,876	65.6%		
North Central	1,589	1,929	82.4%	1,580	1,886	83.8%		
Thurston / Mason	2,163	3,185	67.9%	2,366	3,421	69.2%		
Clark	3,747	4,238	88.4%	3,972	4,366	91.0%		
Peninsula	3,733	4,895	76.3%	4,374	5,747	76.1%		
Spokane	5,656	7,049	80.2%	5,662	7,319	77.4%		
Greater Columbia	6,980	10,252	68.1%	7,553	10,940	69.0%		
Pierce	8,196	13,260	61.8%	7,999	12,334	64.9%		
North Sound	7,518	12,801	58.7%	7,656	12,326	62.1%		
King	13,811	19,842	69.6%	14,228	22,183	64.1%		
Statewide	59,315	85,352	69.5%	62,038	89,072	69.6%		



OUTCOME IV. Living Situation Status: Children & Youth

A. Operational Definition: Percentage of children/youth (0-17 yrs) whose primary residence was listed at any time as their own home, foster care, or other in the Fiscal Year.

Rationale for Use: Maintaining children with mental health problems in the least restrictive environment; minimizing inappropriate out-of-home placements; and returning children quickly to homelike settings are major values of the mental health system. Although housing is influenced by a number of factors, many of which reside outside the mental health system's control, addressing living situations that are detrimental to a child's health and well-being is a major goal of the mental health system.

Operational Measures: The number of children/youth (0-17 yrs) whose primary residence was listed as their own home, foster care, or some other living arrangement at some point in the Fiscal Year by RSN divided by the total number of children or youth outpatient service recipients in the RSN in the same Fiscal Year.

Formula:

Number of children/youth (0-17) whose primary residence was listed as {own home, foster care, other} at any time during the Fiscal Year

Number of children/youth (0-17) outpatient service recipients in the Fiscal Year

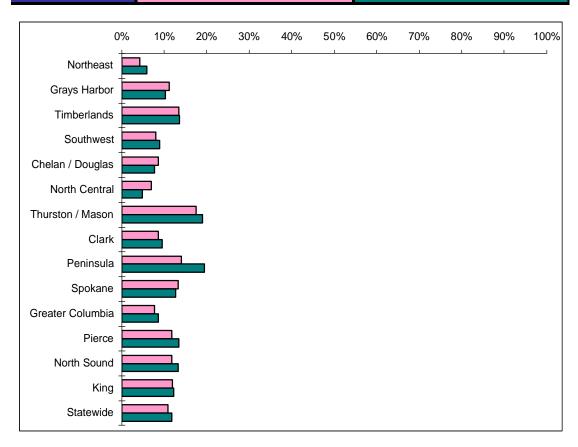
Discussion: This indicator shows the percentage of children/youth who were listed as living in their own home, in foster care, or in other settings as their primary residence at some time during the Fiscal Year. Most youth that received mental health services live in their own home.

- Age is calculated as of January 1, for each Fiscal Year.
- ▶ Children and youth are defined as less than 18 years of age.
- Prior to January 2002, living situation was defined by the Residential Arrangement Code, found in the January 2000 Data Dictionary.
 - Own Home was defined as: code 310 (own home by choice) or 320 (other's home not by choice).
 - ♦ Foster Care was defined as: code 120 (foster home).
 - Other Settings were defined as: code 010 (long-term rehab. facility, or RTF), 020 (nursing facility), 030 (child group home), 040 (congregate care facility), 050 (jail/correctional facility), 060 (interim placement), 110 (adult family home), 330 (homeless), or 999 (other).
- After January 1, 2002, living situation is defined by the Living Situation Code found in the January 2002 Data Dictionary.
 - Own Home is defined as code 10 (private residence without support), 20 (private residence with support)
 - Foster Care is defined as: code 30 (foster care)
 - Other Settings are defined as: code 40 (24-hr residential care), 50 (institutional), 60 (jail/juvenile correction facility), 70 (homeless), and 80 (other).
- The RSN count shows the number of unduplicated clients within each RSN.
- Living situation categories are not unduplicated. A child could appear in all three categories.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Data source is Service Utilization database (data set = outcomes).

Percentage of Youth (0-17 yrs) Who Lived in Their Own Home During the Fiscal Year									
Outcome IV. A. Calc.4/2003 SAS									
		FY01			FY02				
RSN	Served	Own Home	% Own Home	Served	Own Home	% Own Home			
Northeast	454	429	94.5%	508	472	92.9%			
Grays Harbor	715	649	90.8%	742	688	92.7%			
Timberlands	953	862	90.5%	1,001	924	92.3%			
Southwest	1,064	868	81.6%	1,237	1,113	90.0%			
Chelan / Douglas	711	607	85.4%	754	686	91.0%			
North Central	816	721	88.4%	880	766	87.0%			
Thurston / Mason	1,273	1,159	91.0%	1,412	1,299	92.0%			
Clark	2,593	2,181	84.1%	2,652	2,355	88.8%			
Peninsula	1,803	1,426	79.1%	1,783	1,313	73.6%			
Spokane	2,545	2,236	87.9%	2,875	2,450	85.2%			
Greater Columbia	4,851	4,055	83.6%	5,012	4,038	80.6%			
Pierce	5,090	4,055	79.7%	4,948	3,899	78.8%			
North Sound	5,481	3,794	69.2%	5,668	4,323	76.3%			
King	7,157	6,149	85.9%	7,748	6,539	84.4%			
Statewide	35,392	28,900	81.7%	36,873	30,528	82.8%			

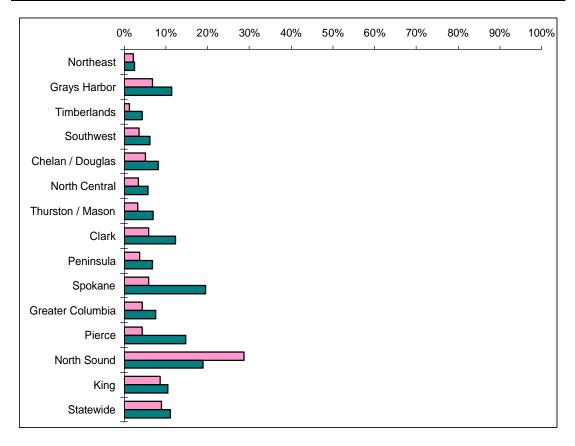


Percentage of Youth (0-17 yrs) Who Lived in Foster Care During the Fiscal Year											
Outcome IV. A. Calc.4/2003 SAS											
		FY01			FY02						
RSN			% Foster			% Foster					
	Served	Foster Care	Care	Served	Foster Care	Care					
Northeast	454	19	4.2%	508	30	5.9%					
Grays Harbor	715	80	11.2%	742	76	10.2%					
Timberlands	953	128	13.4%	1,001	136	13.6%					
Southwest	1,064	86	8.1%	1,237	111	9.0%					
Chelan / Douglas	711	62	8.7%	754	58	7.7%					
North Central	816	57	7.0%	880	43	4.9%					
Thurston / Mason	1,273	223	17.5%	1,412	268	19.0%					
Clark	2,593	226	8.7%	2,652	255	9.6%					
Peninsula	1,803	253	14.0%	1,783	348	19.5%					
Spokane	2,545	338	13.3%	2,875	363	12.6%					
Greater Columbia	4,851	374	7.7%	5,012	429	8.6%					
Pierce	5,090	600	11.8%	4,948	663	13.4%					
North Sound	5,481	647	11.8%	5,668	752	13.3%					
King	7,157	856	12.0%	7,748	949	12.2%					
Statewide	35,392	3,835	10.8%	36,873	4,331	11.7%					



Percentage of Youth (0-17 yrs) Who Lived in Some Other Residence Not Including Their Own Home or Foster Care During the Fiscal Year

Outcome IV. A.					Cal	c.4/2003 SAS	
RSN		<u>FY01</u>		<u>FY02</u>			
	Served	Other	% Other	Served	Other	% Other	
Northeast	454	10	2.2%	508	13	2.6%	
Grays Harbor	715	49	6.9%	742	85	11.5%	
Timberlands	953	12	1.3%	1,001	44	4.4%	
Southwest	1,064	39	3.7%	1,237	77	6.2%	
Chelan / Douglas	711	37	5.2%	754	62	8.2%	
North Central	816	28	3.4%	880	51	5.8%	
Thurston / Mason	1,273	42	3.3%	1,412	98	6.9%	
Clark	2,593	152	5.9%	2,652	326	12.3%	
Peninsula	1,803	67	3.7%	1,783	121	6.8%	
Spokane	2,545	152	6.0%	2,875	560	19.5%	
Greater Columbia	4,851	215	4.4%	5,012	377	7.5%	
Pierce	5,090	224	4.4%	4,948	730	14.8%	
North Sound	5,481	1,579	28.8%	5,668	1,069	18.9%	
King	7,157	618	8.6%	7,748	812	10.5%	
Statewide	35,392	3,169	9.0%	36,873	4,119	11.2%	



OUTCOME IV. Children & Youth Living Situation Status: Homelessness

B. Operational Definition: Percentage of children/youth (0-17 yrs) outpatient service recipients whose primary residence was listed as homeless in the Fiscal Year by RSN and Statewide.

Rationale for Use: Homeless is an extremely negative outcome for youth with mental health problems. Finding and maintaining appropriate housing, is a major goal of the mental health system. Although housing is influenced by a number of factors, many of which reside outside the mental health system, maintaining children and youth (0-17 years) and their families in homes is an important service goal.

Operational Measures: The number of children/youth (0-17 years) outpatient service recipients whose primary residence was listed as homeless at some point in time in the Fiscal Year divided by the total number of children or youth outpatient service recipients in the RSN in the same Fiscal Year.

Formulas:

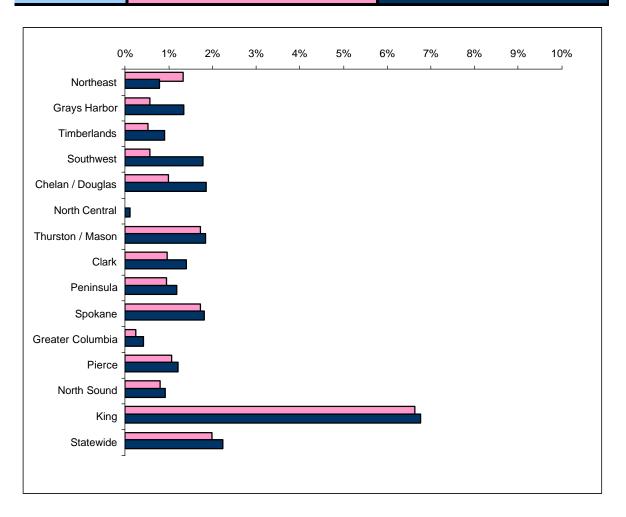
Number of children/youth outpatient service recipients whose primary residence was listed as homeless at any time during the Fiscal Year

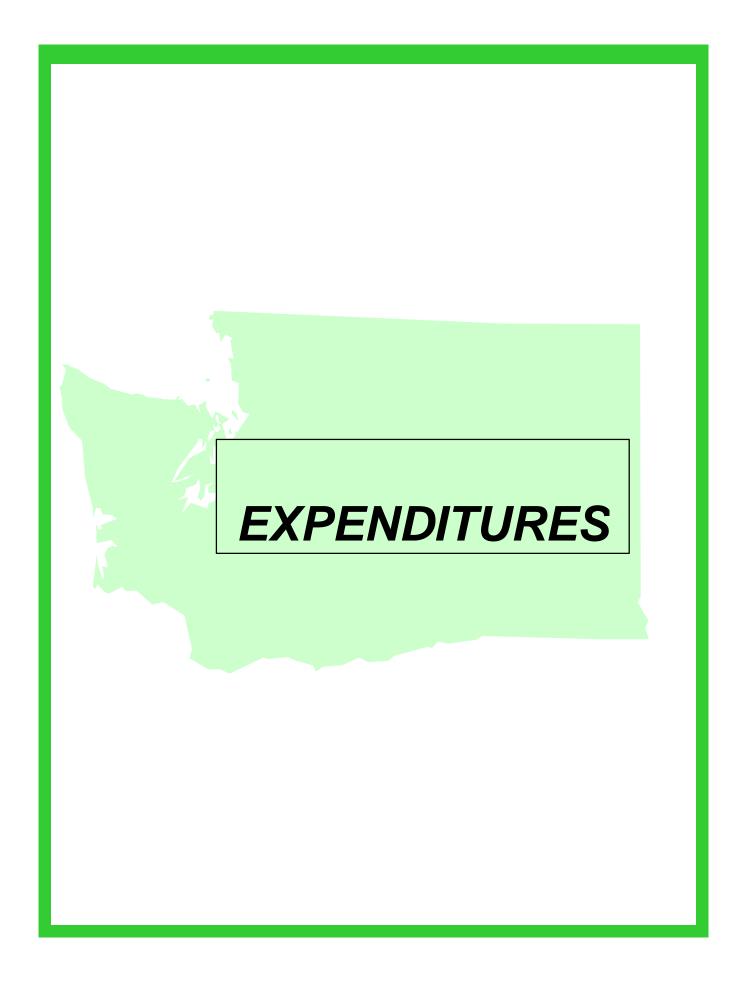
Number of children/youth outpatient service recipients in the Fiscal Year

Discussion: This indicator shows the percentage of children/youth (0-17 years) who were listed as homeless as their primary residence at some point in time during the Fiscal Year by RSN and Statewide. The rates of children who are homeless are extremely low. However, King County, much like with adults, serves the largest percentage of homeless youth.

- Age is calculated as January 1, for each Fiscal Year.
- Children and youth are defined as less than 18 years of age.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Prior to January 2002, homeless was defined by the Residential Arrangement Code found in the January 2000 Data Dictionary. If a person was listed with a code 330 (homeless) at any point in time during the Fiscal Year they were considered homeless for the purposes of this indicator.
- After January 1, 2002, homeless is defined by the Living Situation Element found in the January 2002 Data Dictionary. If a person is listed with a code of 70 (homeless) at any point in time during the Fiscal Year they are considered homeless for the purposes of this indicator.
- The RSN count shows the number of unduplicated clients within each RSN (i.e., one person is counted in <u>each</u> RSN in which they received services).
- Data source is Service Utilization database (data set = outcomes).

Percentage of Fiscal Year	Percentage of Youth (0-17 yrs) Who Were Homeless at Any Time During the Fiscal Year										
Outcome IV. B.	Outcome IV. B. Calc.SAS 4/2003										
RSN		FY01		<u>FY02</u>							
	Homeless	Served	%	Homeless	Served	%					
Northeast	6	454	1.3%	4	508	0.8%					
Grays Harbor	4	715	0.6%	10	742	1.3%					
Timberlands	5	953	0.5%	9	1,001	0.9%					
Southwest	6	1,064	0.6%	22	1,237	1.8%					
Chelan / Douglas	7	711	1.0%	14	754	1.9%					
North Central	0	816	0.0%	1	880	0.1%					
Thurston / Mason	22	1,273	1.7%	26	1,412	1.8%					
Clark	25	2,593	1.0%	37	2,652	1.4%					
Peninsula	17	1,803	0.9%	21	1,783	1.2%					
Spokane	44	2,545	1.7%	52	2,875	1.8%					
Greater Columbia	12	4,851	0.2%	21	5,012	0.4%					
Pierce	54	5,090	1.1%	60	4,948	1.2%					
North Sound	44	5,481	0.8%	52	5,668	0.9%					
King	475	7,157	6.6%	524	7,748	6.8%					
Statewide	705	35,392	2.0%	824	36,873	2.2%					





EXPENDITURES I. Expenditures per Consumer: Community Outpatient Service

A. Operational Definition: Average annual community outpatient expenditures per consumer for a Fiscal Year.

Rationale for Use: Cost indicators can be used to understand trends in resource allocation, demonstrate relative levels of effort and resource availability, and to assess the financial viability of agencies within the public mental health system. They can be combined with other indicators to understand trends in system-level changes across time.

Operational Measures: The number of dollars spent on community outpatient mental health services divided by the total number of community outpatient clients in a Fiscal Year.

Formula:

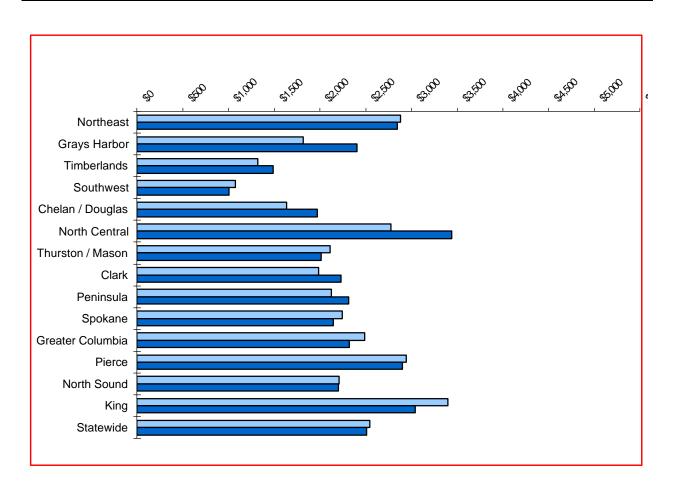
Number of dollars spent on community outpatient mental health services in the Fiscal Year

Number of community outpatient mental health service recipients in the Fiscal Year

Discussion: Cost data are broad estimates of the costs of services provided. Outpatient service costs include therapeutic and residential services and both tertiary and acute services. Revenue and Expenditure reports do not breakout funds by age or ethnic groups, therefore these breakouts are not reported. The average annual outpatient expenditure has gone down slightly. However, there remains significant variability across RSNs.

- Dollar amounts are taken from RSN Revenue and Expenditure Reports. Amounts are calculated from all outpatient expenditures.
- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- ▶ Changes to Revenue and Expenditure reporting in Fiscal Year 2001 improved comparability of data across RSNs.
- Data source for service recipients is Service Utilization Database (specific dataset = su2003).

Expenditures -	Expenditures - Average Annual Outpatient Expenditure per Person									
Expenditrures I. A.										
	FYC)1 Calc.	6/2002	FY02 Calc. 7/2003						
RSN	# OP Served	Total Cost of OP Services	FY01 Average Annual OP Cost per Person		Total Cost of OP Services	FY02 Average Annual OP Cost per Person				
Northeast	1,509	\$4,341,058	\$2,877	1,699	\$4,830,674	\$2,843				
Grays Harbor	2,334	\$4,236,188	\$1,815	2,277	\$5,478,792	\$2,406				
Timberlands	3,302	\$4,350,656	\$1,318	3,686	\$5,475,544	\$1,485				
Southwest	3,838	\$4,116,021	\$1,072	4,565	\$4,579,163	\$1,003				
Chelan / Douglas	2,420	\$3,951,983	\$1,633	2,629	\$5,178,969	\$1,970				
North Central	2,735	\$7,581,367	\$2,772	2,766	\$9,519,721	\$3,442				
Thurston / Mason	4,462	\$9,405,747	\$2,108	4,826	\$9,710,295	\$2,012				
Clark	6,842	\$13,580,401	\$1,985	7,017	\$15,624,239	\$2,227				
Peninsula	6,714	\$14,285,547	\$2,128	6,705	\$15,505,264	\$2,312				
Spokane	9,605	\$21,535,474	\$2,242	10,198	\$21,912,163	\$2,149				
Greater Columbia	13,667	\$34,039,899	\$2,491	15,954	\$37,067,871	\$2,323				
Pierce	18,572	\$54,716,601	\$2,946	17,437	\$50,638,547	\$2,904				
North Sound	18,333	\$40,520,376	\$2,210	17,995	\$39,646,765					
King	27,010	\$91,731,890	\$3,396	29,945	\$91,101,979	\$3,042				
Statewide	121,324	\$308,393,208	\$2,542	126,069	\$316,269,986	\$2,509				



EXPENDITURES I. Expenditures per Consumer: Community Inpatient Service

B. Operational Definition: Average annual expenditure of community inpatient services per inpatient client by RSN and Statewide for a Fiscal Year

Rationale for Use: Cost indicators can be used to understand trends in resource allocation, demonstrate relative levels of effort and resource availability, to assess the financial viability of agencies within the public mental health system. They can be combined with other indicators to understand trends in system-level change across time.

Operational Measures: The number of dollars spent on inpatient mental health services (community hospital, E&T) divided by the total number of inpatient clients in a Fiscal Year.

Formula:

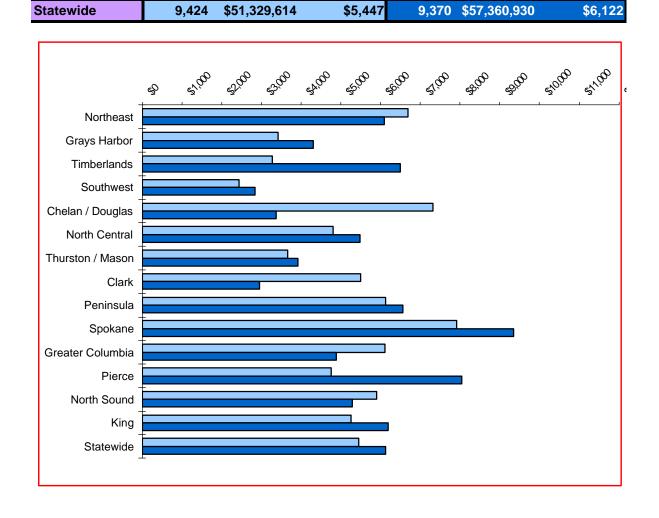
Number of dollars spent on inpatient (CH, E&T) mental health services in the Fiscal Year

Number of mental health inpatient (CH, E&T) service recipients in the Fiscal Year

Discussion: Cost data are broad estimates of the cost of services provided. Inpatient service costs include voluntary and involuntary costs for community hospitals and evaluation and treatment centers. Revenue and Expenditure reports do not breakout funds by age or ethnic groups, therefore, these breakouts are not reported. Inpatient expenditures have increased significantly, though there is a great deal of variability across RSNs.

- ▶ Peninsula, King & North Sound data include E&T services.
- Counts of clients served are unduplicated across Community Hospitals and E&Ts and include the most recent dispute resolutions available at the time of publication.
- A client may have multiple admits, but only be counted once.
- RSNs do not control hospital rates. MAA negotiates and establishes hospital rates, which effect cost.
- Changes to Revenue and Expenditure reporting in Fiscal Year 2001 improved comparability of data across RSNs.
- Dollar amounts are taken from RSN Revenue and Expenditure Reports. Amounts are calculated from all inpatient expenditures.
- Data source for service recipients is Service Utilization Database (dataset = su2003) created from the state hospital census files (HIS).
- Community Hospital data based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from these calculations.
- State Hospitals & CLIP are not included.

Expenditures - Person	Average	Annual Cor	mmunity lnլ	oatient Ex	penditures	per
Expenditures I. B.						
	FY0	1 Calc. (6/200 <u>2</u>	FY0	2 Calc.	7/2003
RSN	# IPs Served	Total Cost of IP Services	Annual IP Cost per Person	# IPs	Total Cost of IP Services	
Northeast	52	\$347,792	\$6,688	46	\$280,175	\$6,091
Grays Harbor	81	\$277,387	\$3,425	68	\$292,728	\$4,305
Timberlands	77	\$252,456	\$3,279	60	\$389,671	\$6,495
Southwest	335	\$816,078	\$2,436	388	\$1,098,528	\$2,831
Chelan / Douglas	44	\$321,740	\$7,312	73	\$245,980	\$3,370
North Central	125	\$601,029	\$4,808	132	\$723,817	\$5,483
Thurston / Mason	266	\$974,016	\$3,662	262	\$1,024,746	\$3,911
Clark	376	\$2,065,465	\$5,493	346	\$1,020,099	\$2,948
Peninsula	590	\$3,616,736	\$6,130	544	\$3,571,536	\$6,565
Spokane	665	\$5,259,053	\$7,908	606	\$5,663,232	\$9,345
Greater Columbia	644	\$3,930,925	\$6,104	634	\$3,097,414	\$4,886
Pierce	1,807	\$8,587,887	\$4,753	1,512	\$12,165,847	\$8,046
North Sound	1,397	\$8,238,596	\$5,897	1,638	\$8,653,505	\$5,283
King	3,052	\$16,040,454	\$5,256	3,094	\$19,133,652	\$6,184



EXPENDITURES II. Expenditures Per Hour of Outpatient Service

A. Operational Definition: Average annual expenditures per hour of outpatient service

Rationale for Use: Cost indicators can be used to understand trends in resource allocation, demonstrate relative levels of effort and resource availability, to assess the financial viability of agencies within the public mental health system. They can be combined with other indicators to understand trends in system-level change across time.

Operational Measures: The number of dollars spent on outpatient mental health services divided by the total number of outpatient service hours in a Fiscal Year.

Formula:

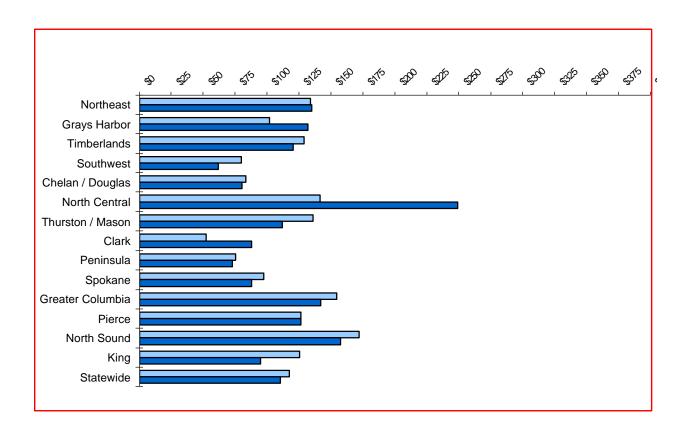
Number of dollars spent on outpatient mental health services in the Fiscal Year by RSN

Number of mental health outpatient service hours in the Fiscal Year by RSN

Discussion: Cost data are broad estimates of the costs of services provided. Outpatient service costs include therapeutic and residential services and both tertiary and acute services. Revenue and Expenditure reports do not breakout funds by age or ethnic groups, therefore these breakouts are not reported. The average expenditure for an hour of outpatient services has gone down overall though there is a great deal of variability across RSNs.

- 2002 data excludes crisis hotline calls, 24-hour crisis services, and residential services as specified in the January 2002 Data Dictionary. Reporting of these services is non-standard across the state.
- Changes to Revenue and Expenditure reporting in Fiscal Year 2001 improved comparability of data across RSNs.
- Dollar amounts are taken from RSN Revenue and Expenditure Reports. Amounts are calculated from all outpatient expenditures.
- Data source for service recipients is Service Utilization Database (dataset = su2003).

Expenditures - Average Annual Expenditures per Hour of Outpatient Service									
Expenditures II. A.									
	FY01 Calc. 6/2002			FY02 Calc. 7/2003					
RSN	# OP Service Hours	Total Cost of OP Services	Average Annual Cost per OP Hour of Service	# OP Service	Total Cost of OP Services	Average Annual Cost per OP Hour of Service			
Northeast	32,435	\$4,341,058	\$134	35,770	\$4,830,674	\$135			
Grays Harbor	41,638	\$4,236,188	\$102	41,588	\$5,478,792	\$132			
Timberlands	33,682	\$4,350,656	\$129	45,543	\$5,475,544	\$120			
Southwest	51,686	\$4,116,021	\$80	73,855	\$4,579,163	\$62			
Chelan / Douglas	47,344	\$3,951,983	\$83	64,274	\$5,178,969	\$81			
North Central	53,591	\$7,581,367	\$141	38,216	\$9,519,721	\$249			
Thurston / Mason	69,104	\$9,405,747	\$136	86,630	\$9,710,295	\$112			
Clark	261,097	\$13,580,401	\$52	177,605	\$15,624,239	\$88			
Peninsula	189,983	\$14,285,547	\$75	212,612	\$15,505,264	\$73			
Spokane	220,847	\$21,535,474	\$98	249,264	\$21,912,163	\$88			
Greater Columbia	220,153	\$34,039,899	\$155	261,012	\$37,067,871	\$142			
Pierce	432,952	\$54,716,601	\$126	400,429	\$50,638,547	\$126			
North Sound	235,479	\$40,520,376	\$172	251,813	\$39,646,765	\$157			
King	732,752	\$91,731,890	\$125	959,774	\$91,101,979	\$95			
Statewide	2,622,743	\$308,393,208	\$118	2,898,384	\$320,658,868	\$111			



EXPENDITURES III. Expenditure Per Day of Community Inpatient Service

A. Operational Definition: Average annual expenditure per day of inpatient service

Rationale for Use: Cost indicators can be used to understand trends in resource allocation, demonstrate relative levels of effort and resource availability, to assess the financial viability of agencies within the public mental health system. They can be combined with other indicators to understand trends in system-level change across time.

Operational Measures: The number of dollars spent on inpatient mental health services (community hospitals, E&Ts) by RSNs in a Fiscal Year divided by the total number inpatient days (community hospitals, E&Ts) by RSN in a Fiscal Year.

Formula:

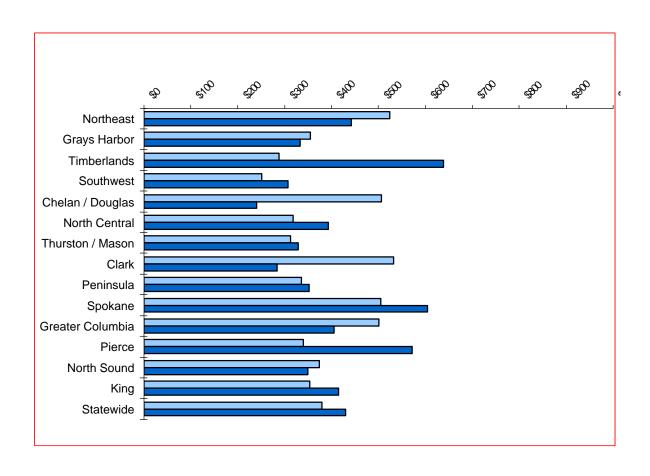
Number of dollars spent on inpatient mental health services in the Fiscal Year by RSN

Number of inpatient days in the Fiscal Year by RSN

Discussion: Cost data are broad estimates of the costs of services provided. Outpatient service costs include therapeutic and residential services and both tertiary and acute services. Revenue and Expenditure reports do not breakout funds by age or ethnic groups, therefore these breakouts are not reported. The average expenditure for an inpatient day has increased overall, through there is considerable variability across the RSNs.

- Peninsula, King & North Sound data include E&T services.
- ▶ RSN days include the most recent dispute resolutions at the time of publication.
- RSNs do not control the hospital rates. MAA negotiates and establishes hospital rates, which effect cost.
- Changes to Revenue and Expenditure reporting in Fiscal Year 2001 improved comparability of data across RSNs.
- Dollar amounts are taken from RSN Revenue and Expenditure Reports. Amounts are calculated from all inpatient expenditures.
- Community hospital data based on Medicaid billing. Prior to July 01 Medicaid-Medicare crossovers were excluded from these calculations.
- Data source for service recipients is Service Utilization Database (specific dataset = su2003).

Expenditures- Average Annual Expenditures per Day of Inpatient Service								
Expenditures III. A.								
	FY01 Calc. 6/2002			FY02 Calc. 7/2003				
RSN	# IP Days	Total Cost of IP Services	Average Annual Cost per Day of IP Service		Total Cost of IP Services	Average Annual Cost per Day of IP Service		
Northeast	663	\$347,792	\$525		\$280,175	\$442		
Grays Harbor	782	\$277,387	\$355	879	\$292,728	\$333		
Timberlands	875	\$252,456	\$289	610	\$389,671	\$639		
Southwest	3,254	\$816,078	\$251	3,580	\$1,098,528	\$307		
Chelan / Douglas	636	\$321,740	\$506	1,022	\$245,980	\$241		
North Central	1,892	\$601,029	\$318	1,842	\$723,817	\$393		
Thurston / Mason	3,119	\$974,016	\$312	3,112	\$1,024,746	\$329		
Clark	3,883	\$2,065,465	\$532	3,591	\$1,020,099	\$284		
Peninsula	10,756	\$3,616,736	\$336	10,121	\$3,571,536	\$353		
Spokane	10,406	\$5,259,053	\$505	9,361	\$5,663,232	\$605		
Greater Columbia	7,853	\$3,930,925	\$501	7,631	\$3,097,414	\$406		
Pierce	25,219	\$8,587,887	\$341	21,275	\$12,165,847	\$572		
North Sound	22,036	\$8,238,596	\$374		\$8,653,505	\$350		
King	45,338	\$16,040,454	\$354	46,084	\$19,133,652	\$415		
Statewide	135,284	\$51,329,614	\$379	133,424	\$57,360,930	\$430		



EXPENDITURES IV. Percent of Expenditures Spent on Direct Service Costs

A. Operational Definition: Percent of revenues spent on direct service costs for a Fiscal Year.

Rationale for Use Cost indicators can be used to understand trends in resource allocation, demonstrate relative levels of effort and resource availability, to assess the financial viability of agencies within the public mental health system and can be combined with other indicators to understand trends in system-level change across time.

Operational Measures: Direct service costs (direct service support expenditures + direct service expenditures) divided by total costs (direct service support expenditures + direct service expenditures + administrative expenditures).

Formula:

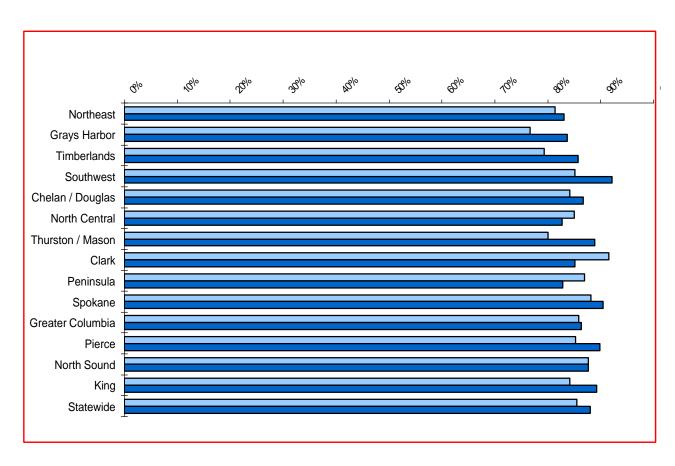
Direct service costs in the Fiscal Year

Total costs in the Fiscal Year

Discussion: Direct service costs include expenditures for outpatient and inpatient services, utilization management, quality assurance and public education about mental illness. The amount spent on direct service costs has increased. All RSNs now spend at least 83% of revenues on direct service costs. Most are spending 85% or more on direct service costs.

- Changes to Revenue and Expenditure reporting in Fiscal Year 2001 improved comparability of data across RSNs.
- Dollar amounts are taken from RSN Revenue and Expenditure Reports. Amounts are calculated from all expenditures.

Expenditures - Percent of Expenditures Spent on Direct Service Costs								
Expenditures IV. A.								
	FY01	Calc. 6/2	2002	FY02 Calc. 7/2003				
RSN	Amount Spent on Direct Costs & Direct Service Support Costs	Total Expenditures	Percent of Expenditures Spent on Direct Service Costs	on Direct Costs & Direct Service	Total Expenditures	Percent of Expenditures Spent on Direct Service Costs		
Northeast	\$3,815,468	\$4,688,850	81%	\$4,242,478	\$5,110,849	83%		
Grays Harbor	\$3,459,398	\$4,513,575	77%	\$4,829,027	\$5,771,520	84%		
Timberlands	\$3,649,251	\$4,603,112	79%	\$5,026,746	\$5,865,216	86%		
Southwest	\$4,197,878	\$4,932,099	85%	\$5,227,146	\$5,677,691	92%		
Chelan / Douglas	\$3,593,367	\$4,273,723	84%	\$4,701,701	\$5,424,949	87%		
North Central	\$6,954,938	\$8,182,396	85%	\$8,466,003	\$10,243,537	83%		
Thurston / Mason	\$8,309,073	\$10,379,763	80%	\$9,541,041	\$10,735,041	89%		
Clark	\$14,317,095	\$15,645,866	92%	\$14,157,799	\$16,644,338	85%		
Peninsula	\$15,566,773	\$17,902,283	87%	\$15,789,533	\$19,076,800	83%		
Spokane	\$23,604,518	\$26,794,527	88%	\$24,934,345	\$27,575,395	90%		
Greater Columbia	\$32,574,417	\$37,970,824	86%	\$34,665,790	\$40,165,285	86%		
Pierce	\$53,986,880	\$63,304,488	85%	\$56,384,982	\$62,804,394	90%		
North Sound	\$42,875,957	\$48,922,454	88%	\$42,319,507	\$48,300,271	88%		
King	\$90,675,171	\$107,772,344	84%	\$98,357,723	\$110,235,630	89%		
Statewide	\$307,580,183	\$359,886,304	85%	\$328,643,821	\$373,630,916	88%		



Glossary of Terms

Fiscal Year

The State Fiscal Year used in this report extends from July 1, yyyy to June 30, yyyy.

Outpatient Served

People who received publicly funded mental health outpatient services excluding clients who only received crisis hotline (NASMHPD temp code 00012), 24-hour crisis services (NASMHPD codes 00010, 00033), or residential services (NASMHPD temp codes 00025-00032, 00034, 00036) as defined in the Mental Health Division's (MHD's) January 2002 Data Dictionary.

Outpatient Services

Publicly funded outpatient mental health services excluding crisis hotline (NASMHPD temp code 00012), 24-hour crisis services (NASMHPD codes 00010, 00033), or residential services (NASMHPD temp codes 00025-00032, 00034, 00036) as defined in the Mental Health Division's (MHD's) January 2002 Data Dictionary.

Medicaid Enrolled

Medicaid recipients who are currently enrolled in a PHIP (RSN). A client is considered to be in the Medicaid enrolled population for the entire Fiscal Year if they received any amount of Medicaid funded service during that Fiscal Year.

Medicaid Population

People who are enrolled in the Medicaid program in a Fiscal Year.

NASMHPD

The National Association of State Mental Health Program Directors.